

Part C State Annual Performance Report (APR) for FFY 2008 July 1, 2008 through June 30, 2009

Overview of the Annual Performance Report Development:

The Annual Performance Report (APR) data was obtained from all thirty- six (36) Local Lead Agencies (LLAs), including two (2) Tribes, with Washington State Infant Toddler Early Intervention Program (ITEIP) contracts.

Results data, for Indicators 2, 5, and 6, was collected from all Individualized Family Service Plans (IFSPs) on December 1, 2008, as reported on 618 Data Tables 1 and 2. Data, for Indicators 3 and 4, was collected from survey results gathered between July 1, 2008 and June 30, 2009. Subsequent IFSP data for these indicators was reviewed on a quarterly basis. Data, for Indicators 1, 7, 8A, 8B, and 8C, was obtained from all IFSPs entered into the ITEIP Data Management System (DMS), from April 1 through June 30, 2009. When noncompliance was identified, written notice of the need for correction was given. Upon this notice, each LLA administrator was directed to begin implementing required improvement activities to ensure correction was made as soon as possible, but no later than one year from notification. Corrective Action Plans identified the resources that needed to be accessed and the timelines that would be followed to achieve compliance and/or improve performance and were required of all Local Lead Agencies that had not fully correct identified noncompliance by the time annual determinations were issued. The Indicator 9 Worksheet and Indicator 14 Rubric have been inserted into this document.

On January 21, 2010, the State Interagency Coordinating Council (SICC) dedicated several hours to reviewing and discussing Washington State's Part C APR. The measureable and rigorous targets and the actual data for FFY 2008 were vigorously discussed. Some indicators were discussed in more detail. Indicators 3 A, B, C, 5 and 9 Child Outcomes (Indicators 3 A, B, C) progress data, baseline summary statement data, and annual targets were discussed, with some concerns expressed about Child Outcome Summary Form (COSF) data quality and the requirement to set targets in this APR. Improvement activities planned for the coming year were also discussed, with the expectation that data quality will continue to improve over the next year. Birth to 1-year Child Find data (Indicator 5) was also discussed in detail. A review of the reasons for the continuing low percentage of infants, birth to 1-year being identified and determined eligible occurred. New improvement activities were also discussed. ITEIP's general supervision system, including monitoring, complaints, and hearings (Indicator 9) was also discussed in detail. The importance of the new ITEIP DMS detailed compliance report was discussed. The report was identified as a key factor in the significant improvements made in the timely identification and correction of noncompliance reflected in this APR. This detailed compliance report provided an additional data analysis tool to identify and correct data entry errors, review individual child status, and identify the need for additional technical assistance.

The current revised State Performance Plan (SPP), APR, Local Lead Agency APR Data, and Local Lead Agency Determination Status is on the ITEIP website, at <http://www.dshs.wa.gov/iteip/Publications.html> and scroll down the page. The information is also posted on the ITEIP homepage, under What's "new", at www.dshs.wa.gov/iteip. Information on how to access these reports is disseminated, via email, to our SICC, Local Lead Agencies, and other stakeholders.

In the June 1, 2009 FFY 2007 Determination Letter, OSEP notified the Washington State Department of Social and Health Services (DSHS) ITEIP that it continued to "need assistance" in meeting the requirements and purposes of Part C of the IDEA. The letter and response table summarized APR federal requirements, identified the public reporting requirements, and the state's status, as determined by the Secretary of Education. DSHS was advised to obtain technical assistance (TA) in the following area:

- Indicator 9 – Timely correction of noncompliance

As required in the June 1, 2009 letter, Washington State DSHS performed the following:

- A. Notified the public of this action, by posting Washington's Part C determination letter on the agency's ITEIP website, by distributing this information to the SICC and committees, and by distributing it through a broadcast email to stakeholders.
- B. Accessed the "Technical Assistance Related to SPP Indicators and Determinations" website, reviewed the investigative questions, and determined the technical assistance and actions that were most appropriate. For information about the technical assistance received and actions taken, please see the applicable Indicators.

**Part C State Annual Performance Report (APR) for FFY 2008
July 1, 2008 through June 30, 2009**

Overview of the Annual Performance Report Development:

See Overview of the APR Development, page 1.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 1: Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement:

Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Account for untimely receipt of services, including the reasons for delays.

Applied:

3,024 infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner

3,114 infants and toddlers with IFSPs

Percent = $(3024/3114) * 100 = 97\%$

FFY	Measurable and Rigorous Target
2008 (2008 – 2009)	100% of infants and toddlers with IFSPs receive the early intervention services on their IFSP in a timely manner.

Actual Target Data for FFY 2008:

- A. **97%** or 3,024 of 3,114 infants and toddlers with IFSPs received early intervention services on their IFSPs in a timely manner. Of the infants and toddlers with IFSPs that met the timely services requirement:
- 86% or 2,694 of 3,114 infants and toddlers received services in a timely manner; and,
 - 11% or 330 of 3,114 infants and toddlers received services late, due to exceptional family circumstances.
- B. **3%** or 90 of 3,114 infants and toddlers with IFSPs received some late services, due to reasons other than exceptional circumstance, such as:
- Provider scheduling errors
 - Interpreter scheduling problems or late cancellations
 - Therapist illness

Services were required to begin no later than 30 days from the date of the IFSP when the parent provided consent. When services were not provided in a timely manner, due to exceptional family or child circumstances, documentation in either the IFSP or other service records was required. Service dates are a required field and must be entered into the ITEIP Data Management System (DMS).

For FFY 2008, there was a change in the way data was collected for this indicator because data for this indicator is from the DMS, which is a significantly larger pool of children than prior years, and more accurately reflects Local Lead Agency performance. Therefore, FFY 2008 data is not comparable to data previously collected and reported. Compliance data for Indicator 1 was obtained from all IFSPs entered into the ITEIP DMS, from April 1 through June 30, 2009. Prior to FFY 2008, ITEIP obtained data for this indicator from onsite monitoring visits.

During FFY 2008, ITEIP enhanced its DMS, by developing a detailed compliance report to ensure data accuracy. This report provided an additional data analysis tool essential to identifying and correcting data entry errors, reviewing individual child status, and identifying the need for additional technical assistance.

Correction of Noncompliance Related to Indicator 1:

FFY	Number of Findings of Noncompliance Related to Indicator 1	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified
FFY 2005	1	0	1 (2007)
FFY 2006	0	0	0
FFY 2007	1	1	0
FFY 2008	3	To be reported in the FFY 2009 APR	

To verify correction of noncompliance, ITEIP staff reviewed DMS data for each LLA to verify that: (1) all children (who remained within jurisdiction of the program) received services, although late; and (2) current data reflects that the LLA is meeting the requirement to provide all services timely. In order to demonstrate the requirement is met, one month of data must demonstrate that 100% of services were provided timely.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred:

Determination: FFY 2007 Needs Assistance – Year 2

Technical assistance continued to be accessed from the Regional Resource Center's Program website SPP/APR calendar, the National Early Childhood Technical Assistance Center website, Western Regional Resource Center (WRRRC), and National Early Childhood Technical Assistance Center (NECTAC) staff. ITEIP requested and received, in June 2009, onsite technical assistance from WRRRC and NECTAC staff. The technical assistance focused on strengthening ITEIPs system of general supervision, including monitoring and the identification and correction of noncompliance.

Based on the technical assistance received, the following actions were taken and included:

- Enhanced DMS data collection and analysis
- Developed and implemented a new DMS detailed compliance report with data drill down capacity
- Established process for reviewing DMS data for annual monitoring including identifying noncompliance, the root cause of noncompliance, and required corrective actions prior to issuing written notification of findings"

- Policy clarification and guidance
- Provided targeted technical assistance

For Indicator 1, progress was made in moving closer to full compliance. During FFY 2008, annual compliance data was shared at Local Lead Agency (LLA) quarterly meetings, State Interagency Coordinating Council (SICC) and committee meetings. As required, it was also posted on the ITEIP website. A primary strategy ITEIP used to make needed improvements was increased use of data to focus training and technical assistance efforts and included:

- Provision of targeted technical assistance based upon LLA compliance data.
- Enhanced training and technical assistance by contracting with two (2) early intervention consultants, with assessment and service provision expertise. LLAs determined to need assistance and/or need intervention were prioritized to receive consultant services.
- Provided formal training offering continuing education clock hours at LLA quarterly meetings.
- Developed and disseminated an Evaluation/Assessment Practice Guide that was reviewed by NECTAC/WRRC staff prior to dissemination. The guide promoted evaluation/assessment and eligibility practices that resulted in more efficient eligible decisions and provision of timely services.
- One (1) LLA was required to submit a monthly compliance data report, until needed correction occurred.

Over the past year, ITEIP increased its capacity to collect and analyze Indicator 1 data through the enhancements that were made to the ITEIP DMS. Due to DMS improvements, LLAs and ITEIP were able to utilize IFSP detailed compliance reports on an ongoing basis to assess the provision of timely services for identified providers and by each Family Resources Coordinator (FRC). With this information, LLAs were able to analyze their own data and make needed correction. ITEIP also provided targeted technical assistance when needed. Periodic review of compliance indicator data enabled ITEIP to strengthen its ability to ensure that the timely correction of noncompliance actually occurred.

Improvement Activities Completed for FFY 2008:

ITEIP staff provided technical assistance to all LLAs on the compliance requirement to provide services in a timely manner consistent with Washington State's standard.
Developed and used the ITEIP DMS detailed compliance report to review LLA compliance data and provide focused technical assistance when needed.
Maintained contract language that required LLAs to provide in their semi-annual reports program improvement information that describes the activities and strategies that were implemented to meet the timely services compliance requirement.
ITEIP provided training on school district required participation in early intervention by September 1, 2009, at the annual Office of the Superintendent of Public Instruction and Washington Association of School Administrators summer conference.
Continued to facilitate quarterly LLA contractor meetings, where each agenda included time to review and discuss SPP/APR compliance and performance data.
Continued to monitor mediation requests, citizen's complaints, and administrative hearings for compliance with the timely services requirement. During this report timeframe, there were no formal complaints, mediation, or administrative hearing requests filed.

Revisions (With Justification) to Proposed Targets/Improvement Activities/Timelines/Resources:

ITEIP will continue to implement identified improvement activities.

Continuing Improvement Activities

Activities	Timelines	Resources
Convene quarterly LLA contractor meetings.	2008 – 2010	ITEIP and LLAs
Monitor mediation requests, citizen's complaints, and administrative hearings for compliance with the timely services requirement.	2008 – 2010	ITEIP
Complete timely citizen complaint investigations and assure corrective action plans are implemented.	2008 – 2010	ITEIP
Use ITEIP DMS detailed compliance report to review progress and provide focused technical assistance and training.	2008 - 2010	ITEIP and LLAs

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Overview of the Annual Performance Report Development:

See Overview of the APR Development, page 1.

Monitoring Priority: Early Intervention Services in Natural Environments

Indicator 2: Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement:

Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings divided by the (total # of infants and toddlers with IFSPs)] times 100.

Applied:

4,059 infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children

4,906 total # of infants and toddlers with IFSPs

Percent = (4059/4906) * 100 = **83%**

FFY	Measurable and Rigorous Target
2008 (2008 – 2009)	80% of infants and toddlers with IFSPs will receive early intervention services in the home or programs for typically developing children as their primary service setting.

Actual Target Data for FFY 2008:

83% of infants and toddlers with IFSPs received early intervention services in home or community-based settings as their primary service setting. This data is based on the December 1, 2008 child count. ITEIP exceeded the annual target for this indicator.

ITEIP gathered and reviewed Indicator 2 data at the quarterly Local Lead Agency (LLA) meetings. Program Managers provided training and technical assistance, when necessary.

Based on the October 2008 communication with OSEP, it was recommended that ITEIP continue to implement its policies and procedures related to service provision in natural environments, with LLA compliance monitored closely and enforcement actions taken, when needed.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

ITEIP's FFY 2008 data of 83% represents progress from its FFY 2007 data of 74%. ITEIP exceeded its FFY 2008 target of 80%.

Washington's State Interagency Coordinating Council (SICC) and committees reviewed and analyzed natural environments data at quarterly meetings. ITEIP met with local ICCs and LLAs, providing policy

guidance when data demonstrated their annual target was not being met. For the LLAs that continued to be challenged in meeting the natural environments requirement, ITEIP continued to provide guidance and technical assistance. Additional guidance has also been provided on appropriate justifications when services could not be provided in the natural environment. ITEIP's Data Management System (DMS) has been updated to reflect the three 618 setting options.

Improvement Activities Completed for FFY 2008:

At each of the quarterly meetings, the SICC reviewed ITEIP settings data and compared actual performance with the established target. This data review process assisted ITEIP and LLAs in setting priorities, implementing improvement strategies, and providing technical assistance.
SICC and Data Committee meetings included a review of settings data. These reviews facilitated a more in-depth discussion about the local issues that may have contributed to a LLA's low performance. The review of settings data also contributed to the identification of potential improvement strategies that were then reported at SICC meetings.
As new quarterly data became available, it was distributed to the LLAs. LLAs needing improvement were more clearly identified, with the technical assistance provided in a more focused and individualized manner. ITEIP site visits and technical assistance phone conferences allowed direct discussions with LLAs who failed to meet state targets.
LLA contract language was strengthened to require reporting of local improvement efforts that addressed the natural environments requirements.

Revisions (With Justification) to Proposed Targets/Improvement Activities/Timelines/Resources:

ITEIP will continue to implement previously identified improvement activities and new capacity building activities made possible with ARRA funds.

Continuing and New Improvement Activities:

Activities	Timelines	Resources
Work with early intervention funding sources to assist with meeting annual performance target and compliance requirements.	2008 – 2010	ITEIP and participating state agencies
LLA capacity building projects focusing on timely and effective delivery of services.	2010 – 2010	ARRA funding and ITEIP staff
Develop a Practice Guide related to appropriate justifications when services are not provided in a natural environment.	2010 – 2010	ITEIP staff and technical assistance contractors

Part C State Performance Plan (SPP) for FFY 2008 - Revised
July 1, 2008 through June 30, 2009

Overview of the Annual Performance Report Development:

See Overview of the APR Development, page 1.

Monitoring Priority: Early Intervention Services in Natural Environments

Indicator 3: Percent of infants and toddlers with IFSPs who demonstrate improved

- A. Positive social-emotional skills (including social relationships)**
- B. Acquisition and use of knowledge skills (including early language/communication)**
- C. Use of appropriate behaviors to meet their needs.**

(20 USC 1416(a) (3)(A) and 1442)

Measurement: (As defined by the Individuals with Disabilities Education Act [IDEA] and the Office of Special Education Programs)

- A. Positive social-emotional skills (including social relationships):
 - a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
 - b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
 - c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
 - d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = [(# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
 - e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

If a + b + c + d + e does not sum to 100%, explain the difference.
- B. Acquisition and use of knowledge and skills (including early language/communication and early literacy):
 - a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
 - b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to

same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

- c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = [(# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by (# of infants and toddlers with IFSPs assessed)] times 100.

If a + b + c + d + e does not sum to 100%, explain the difference.

C. Use of appropriate behaviors to meet their needs:

- a. Percent of infants and toddlers who did not improve functioning = [(# of infants and toddlers who did not improve functioning) divided by (# of infants and toddlers with IFSPs assessed)] times 100.
- b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = [(# of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers) divided by the (# of infants and toddlers with IFSPs assessed)] times 100.
- c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = [(# of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it) divided by the (# of infants and toddlers with IFSPs assessed)] times 100.
- d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = [(# of infants and toddlers who improved functioning to reach a level comparable to same-aged peers) divided by the (# of infants and toddlers with IFSPs assessed)] times 100.
- e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = [(# of infants and toddlers who maintained functioning at a level comparable to same-aged peers) divided by the (# of infants and toddlers with IFSPs assessed)] times 100.

If a + b + c + d + e does not sum to 100%, explain the difference.

Applied

A. Positive social-emotional skills (including social relationships):

- a. 20 infants and toddlers who did not improve functioning
1,146 infants and toddlers with IFSPs assessed
Percent = $(20/1146) * 100 = 1.75\%$
- b. 223 infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers
1,146 infants and toddlers with IFSPs assessed
Percent = $(223/1146) * 100 = 19.46\%$
- c. 201 infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it
1,146 infants and toddlers with IFSPs assessed
Percent = $(201/1146) * 100 = 17.54\%$

- d. 361 infants and toddlers who improved functioning to reach a level comparable to same-aged peers
1,146 *infants* and toddlers with IFSPs assessed
Percent = $(361/1146) * 100 = 31.50\%$
- e. 341 infants and toddlers who maintained functioning at a level comparable to same-aged peers
1,146 infants and toddlers with IFSPs assessed
Percent = $(341/1146) * 100 = 29.76$

Totals: $1.75 + 19.46 + 17.54 + 31.50 + 29.76 = 100\%$

B. Acquisition and use of knowledge and skills

- a. 26 infants and toddlers who did not improve functioning
1,146 infants and toddlers with IFSPs assessed.
Percent = $(26/1146) * 100 = 2.27\%$
- b. 242 infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers
1,146 infants and toddlers with IFSPs assessed
Percent = $(242/1146) * 100 = 21.12\%$
- c. 182 infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it
1,146 infants and toddlers with IFSPs assessed
Percent = $(182/1146) * 100 = 15.88\%$
- d. 294 infants and toddlers who improved functioning to reach a level comparable to same-aged peers
1,146 infants and toddlers with IFSPs assessed
Percent = $(294/1146) * 100 = 25.65\%$
- e. 402 infants and toddlers who maintained functioning at a level comparable to same-aged peers
1,146 infants and toddlers with IFSPs assessed
Percent = $(402/1146) * 100 = 35.08\%$

Totals: $2.27 + 21.12 + 15.88 + 25.65 + 35.08 = 100\%$

C. Use of appropriate behaviors to meet their needs:

- a. 21 infants and toddlers who did not improve functioning
1,146 infants and toddlers with IFSPs assessed
Percent = $(21/1146) * 100 = 1.83\%$
- b. 200 infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers
1,146 infants and toddlers with IFSPs assessed
Percent = $(200/1146) * 100 = 17.45\%$
- c. 150 infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it
1,146 infants and toddlers with IFSPs assessed
Percent = $(150/1146) * 100 = 13.09\%$
- d. 395 infants and toddlers who improved functioning to reach a level comparable to same-aged peers
1,146 infants and toddlers with IFSPs assessed
Percent = $(395/1146) * 100 = 34.47\%$
- e. 380 infants and toddlers who maintained functioning at a level comparable to same-aged peers

1,146 infants and toddlers with IFSPs assessed
 Percent = $(380/1146) * 100 = 33.16\%$

Totals: $1.83 + 17.45 + 13.09 + 34.47 + 33.16 = 100\%$

Measurement for Summary Statement 1

Percent =

of infants and toddlers reported in progress category (c) plus
 # of infants and toddlers reported in category (d) divided by
 [# of infants and toddlers reported in progress category (a) plus # of infants and toddlers
 reported in progress category (b) plus # of infants and toddlers reported in progress category
 (c) plus # of infants and toddlers reported in progress category (d)] times 100.

Applied to Outcome A

201 infants and toddlers reported in progress category (c) plus
 361 infants and toddlers reported in category (d) divided by
 20 infants and toddlers reported in progress category (a) plus
 223 infants and toddlers reported in progress category (b) plus
 201 infants and toddlers reported in progress category (c) plus
 361 infants and toddlers reported in progress category (d) times 100.

Percent = $[(201+361) / (20+223+201+361)] * 100 = 69.8\%$

Applied to Outcome B

182 infants and toddlers reported in progress category (c) plus
 294 infants and toddlers reported in category (d) divided by
 26 infants and toddlers reported in progress category (a) plus
 242 infants and toddlers reported in progress category (b) plus
 182 infants and toddlers reported in progress category (c) plus
 294 infants and toddlers reported in progress category (d) times 100.

Percent = $[(182+294)/(26+242+182+294)] * 100 = 64.0\%$

Applied to Outcome C

150 infants and toddlers reported in progress category (c) plus
 395 infants and toddlers reported in category (d) divided by
 21 infants and toddlers reported in progress category (a) plus
 200 infants and toddlers reported in progress category (b) plus
 150 infants and toddlers reported in progress category (c) plus
 395 infants and toddlers reported in progress category (d) times 100.

Percent = $[(150+395)/(21+200+150+395)] * 100 = 71.1\%$

Measurement for Summary Statement 2

Percent =

of infants and toddlers reported in progress category (d) plus# of infants and toddlers reported in progress category (e) divided by the total

[# of infants and toddlers reported in progress categories (a) + (b) + (c) + (d) + (e)] times 100

Applied to Outcome A

361 infants and toddlers reported in progress category (d) plus

341 infants and toddlers reported in progress category (e) divided by the total

1,146 infants and toddlers reported in progress categories

Percent = $[(361+341)/(20+223+201+361+341)] * 100 = 61.3\%$ **Applied to Outcome B**

294 infants and toddlers reported in progress category (d) plus

402 of infants and toddlers reported in progress category (e) divided by the total

1,146 of infants and toddlers reported in progress categories

Percent = $[(294+402)/(26+242+182+294+402)] * 100 = 60.7\%$ **Applied to Outcome C**

395 infants and toddlers reported in progress category (d) plus

380 infants and toddlers reported in progress category (e) divided by the

1,146 infants and toddlers reported in progress categories

Percent = $[(395+380)/(21+200+150+395+380)] * 100 = 67.6\%$ **Overview of Issue/Description of System or Process:**

The following description of our process has not changed since it was reported in February 2009:

In March of 2006, Washington Infant Toddler Early Intervention Program, in partnership with Westat, received a federal Office of Special Education Programs (OSEP), General Supervision Enhancement Grant (GSEG). The grant helped to fund the Washington Child and Family Outcomes Measurement Project. The grant assisted ITEIP in determining how best to meet the requirement to collect and measure child outcome data. It also assisted ITEIP in making needed enhancements to its DMS, for collecting child outcome data.

Because the GSEG grant award and OSEP SPP/APR timelines did not coincide, the five-phase project implementation plan and timeline did not result in producing required entry data for the February 2007 APR. During 2007, the GSEG/Westat grant provided the resources needed by ITEIP to begin to meet this new data collection and reporting requirement in a coordinated and systematic way. The GSEG also funded technical assistance from SRI International/Early Childhood Outcomes (ECO) Center, National Early Childhood Technical Assistance Center (NECTAC), and Westat.

The following is a brief summary of GSEG Child and Family Outcomes Project activities and timelines that occurred from January through June of 2007:

- January 2007, the decision to pilot the ECO Center Child Outcomes Summary Form (COSF) was made and five (5) pilot sites were selected to participate in the project.
- February 5-6, 2007, pilot site team training was conducted on the COSF, with Westat, ECO Center, and National Early Childhood Technical Assistance Center (NECTAC) staff assistance.
- February through April 2007, pilot sites implemented the COSF process and participated in weekly technical assistance conference calls, for each individual pilot site, and as combined sites monthly, with the Project Coordinator and ITEIP staff.

- May 2007, statewide COSF training occurred at three locations – Seattle, Ellensburg, and Spokane. Approximately 400 individuals participated, as members of local Individualized Family Service Plan (IFSP) teams. ITEIP was again assisted by SRI International/ECO Center, NECTAC, and Westat; and,
- July 1, 2007, statewide implementation of the COSF process occurred for all Local Lead Agencies (LLAs) and all IFSP teams.

From February to April 2007, the piloting phase of collecting child outcome information occurred. Pilot teams practiced the COSF process and completed seventy-eight (78) entry or exit COSFs. The five county LLA sites participating in the COSF pilots included Chelan/Douglas, Kitsap, Pierce, Skagit, and Yakima. Of the seventy-eight (78) children with COSFs completed by pilot teams, thirty-five (35) were entry summaries.

Of the thirty-five (35) children with entry COSFs, four (4) children received an exit COSF prior to transitioning from ITEIP, since they had been in services for at least six months. Even though the progress data N size reported in this submission is very small, it does verify ITEIP now has a system in place that is capable of collecting and reporting child progress data. Additionally, between July 1, 2007 and January 20, 2008, *1,771 entry COSFs have been completed*, for each child determined eligible for early intervention services.

Policies and Procedures to Guide Outcome Assessment and Measurement Practices Summary:

- All eligible infants and toddlers will have child outcome data collected at entry, using the COSF process. Entry child outcome data will be completed prior to completion of the initial IFSP meeting.
- All infants and toddlers who have had an entry COSF, and who have received at least six months of consecutive service, will have an exit COSF completed prior to leaving early intervention. The exit COSF process must be completed no more than 60 days prior to the child's exit from the early intervention program. An exception to this requirement will be made when a child enters early intervention at two years, six months of age, or later. Under this circumstance, the child will not be required to have an entry COSF, because he or she will not be in service for the required six-month period.
- IFSP teams may elect to collect child outcome data more often to evaluate child progress on a more frequent basis. When this occurs, the COSF must clearly reflect this purpose, so that the data is not included as entry or exit summaries in the APR data.
- Exit data will be collected when the infant or toddler exits the early intervention program for one of the following reasons: (a) The child is no longer eligible for early intervention, because the child no longer meets eligibility criteria; (b) It is anticipated that the child will move out of state; or (c) The child will transition from early intervention at age three to community or Part B preschool services.

Measurement Strategies to Collect Data:

What population of children will be included in measuring child outcomes using the COSF?

All infants and toddlers entering the early intervention system on or after July 1, 2007 will have COSF entry data collected if they will be in program six months or longer.

What assessment/measurement tools(s) and/or other data sources will be used.

The child's IFSP team, including the child's parents/family, will use a variety of data sources to make a determination of the child's level of performance. The child's performance will be rated using the COSF developed by the ECO Center. When making a determination of the child's performance, all teams will gather information through a variety of data sources, including norm-referenced and curriculum-based measures, parent report, professional observations, and notes.

When norm-reference or curriculum based instruments are administered by appropriately trained team members, some of the instruments or measures that will be more frequently used include:

- Ages and Stages (ASQ)
- Assessment, Evaluation, and Programming System for Infants and Children (AEPS) Second Edition – Birth to Three
- Battelle Developmental Inventory – Second Edition (BDI-2)
- Carolina Curriculum for Infants and Toddlers with Special Needs (CCITSN)
- Developmental Assessment of Young Children (DAYC)
- Hawaii Early Learning Profile

IFSP teams are not required to administer any one assessment tool or instrument for program planning and/or outcome measurement purposes. IFSP teams will make assessment tool selection decisions based upon the needs of the child and family. IFSP teams will be encouraged to use the assessment tools that have been cross-walked by the ECO Center with the three child outcomes. Assessment data is obtained by a team of professionals, including the family of each child entering and exiting early intervention. The COSF is being completed by the IFSP team at entry and no later than the initial IFSP meeting and at exit within sixty days (60) of the child's exit from early intervention.

What data will be reported to the state and how will the data be transmitted?

On an ongoing basis, LLAs will enter the COSF data into the ITEIP DMS. Until the data system update is completed, a survey monkey has been designed and LLAs are using it to transmit entries and exit summaries to ITEIP.

What data analysis methods will be used to determine the progress categories?

The ITEIP DMS will be programmed to calculate child progress, using the ECO Center algorithms. ITEIP state policy staff will analyze data and ensure LLAs and providers also review and analyze the child outcome summary data. Completion of this programming update to the system is projected to be June 2008. From completion forward, child outcome summaries will be entered into the DMS. Until completion, data will continue to be entered into the confidential online survey format and submitted to ITEIP.

What criteria will be used to determine whether a child's functioning is "comparable to same age peers"?

ITEIP has adopted the ECO Center's "comparable to same-aged peers" or "overall age appropriate" definition (equivalent to a rating of 6-7 on the ECO COSF 7-point rating scale), as described in the COSF Narrative Summary.

Training and Technical Assistance Plan for Administrators and Service Providers:

The ITEIP website will continue to contain past and most current training materials and forms, for easy access and download capability. ITEIP will continue to provide ongoing COSF training for early intervention personnel, as needed. ITEIP will provide information updates to LLA administrators on current COSF implementation issues. Early intervention personnel will be provided opportunities to attend training on the use of curriculum-based measures, through Regional Educational Service Districts. Early intervention personnel will be provided opportunities to attend training on early childhood assessment practices, at the annual Infant and Early Childhood Conference.

ITEIP Quality Assurance and Monitoring Procedures:

ITEIP's DMS will be programmed to gather and aggregate child outcome data. This will minimize errors and prevent omissions in data entry. ITEIP will support LLA administrators in performing a periodic review of randomly selected COSFs, to assess quality and completeness of form and process. ITEIP will sort and analyze COSF data in multiple ways (i.e. by LLAs; and Division of Developmental Disabilities [DDD] Regions) to identify possible errors and/or provide focused technical assistance, as needs are identified.

Baseline Data:

The Early Childhood Outcomes (ECO) Center, Child Outcomes Summary Form (COSF), on the ITEIP DMS, continued to be used for collecting and reporting the outcome data presented in this APR. This data was used to calculate the two summary statements for each of the three child outcome indicators.

The number of children reported for Indicator 3 increased from four (4) children in FFY 2006 to 279 children in FFY 2007 and 1,146 children in FFY 2008. During FFY 2008, enhancements made to the ITEIP DMS provided detailed child level data, for all eligible children in the system, verified the data was entered correctly at the user level, and provided detailed reporting that was used to correct data and to focus training and technical assistance.

Of the 4,655 children who exited between July 1, 2008 and June 30, 2009, 1,146 children had entry and exit COSFs and were in program for at least six months. There will not be a full three-year cohort until July 1, 2010, which is seven months into FFY 2009. The data for these 1,146 children are presented in the following tables:

Progress Data for Infants and Toddlers Exiting 2008-2009

A. Positive social-emotional skills (including social relationships)	Number of Children	% of children
a) Percent of infants and toddlers who did not improve functioning:	20	1.75%
b) Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers:	223	19.46%
c) Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers, but did not reach (it):	201	17.54%
d) Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers:	361	31.50%
e) Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers:	341	29.76%
Total	N = 1,146	100%

B. Acquisition and use of knowledge and skills (including early language/communication and early literacy):	Number of Children	% of children
a) Percent of infants and toddlers who did not improve functioning:	26	2.27%
b) Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers:	242	21.12%
c) Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers, but did not reach (it):	182	15.88%
d) Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers:	294	25.65%
e) Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers:	402	35.08%
Total	N = 1,146	100%

C. Use of appropriate behaviors to meet their needs:		Number of Children	% of children
a)	Percent of infants and toddlers who did not improve functioning:	21	1.83%
b)	Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers:	200	17.45%
c)	Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers, but did not reach (it):	150	13.09%
d)	Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers:	395	34.47%
e)	Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers:	380	33.16%
Total		N = 1,146	100%

Baseline Data for Infants and Toddlers Exiting 2008-2009
Summary Statements

Outcome A – Positive social-emotional skills

1. **69.8%** of the children who *entered and exited the program below age expectations substantially increased their rate of growth* by the time they turned 3 years of age or exited the program.
2. **61.3%** of the children who were functioning within age expectations by the time they turned 3 years of age or exited the program.

Outcome B – Acquiring/using knowledge and skills

1. **64.0%** of the children who *entered and exited the program below age expectations substantially increased their rate of growth* by the time they turned 3 years of age or exited the program.
2. **60.7%** of the children who were functioning within age expectations by the time they turned 3 years of age or exited the program.

Outcome C – Use of appropriate behaviors to get needs met

1. **71.1%** of the children who *entered and exited the program below age expectations substantially increased their rate of growth* by the time they turned 3 years of age or exited the program.
2. **67. 6%** of the children who were functioning within age expectations by the time they turned 3 years of age or exited the program.

Discussion of Baseline Data:

The relatively high number of children who were functioning within age expectations by the time they turned 3 years of age or exited the program needs to be explored. While annual transition data continued to reflect an increasing number of children did not qualify for special education at age three, this data could suggest the children who did not qualify for special education at transition are functioning within age expectation at the age of three. Even though the data is not comparable, it is worth considering and exploring the reasons for the significant difference between the per cent of children not qualifying for special education at age 3 years and the per cent of children who are functioning within age expectations by the time they turn 3 years of age or exit program.

During 2008-2009, of all children exiting program at age 3 years, 28% did not qualify for special education. For that same time period, of all children exiting program with both entry and exit COSFs, an average of 63% of children were functioning within age expectations in the three child outcomes which is more than twice the per cent of children that did not qualify for special education during that same time period. Local procedures should be reviewed and technical assistance provided to confirm the COSF process is being implemented correctly.

Measureable and Rigorous Targets:**Targets for Infants and Toddlers Exiting in FFY 2009 (2009-2010) and
FFY 2010 (2010-2011) and Reported in February 2011 and February 2012**

FFY	Measureable and Rigorous Targets
2009 (2009-2010)	<p>Outcome A Summary Statements– Positive social-emotional skills</p> <ol style="list-style-type: none"> 1. 69.9% of the children who <i>entered and exited the program below age expectation substantially increased their rate of growth</i> by the time they turned 3 years of age or exited the program. 2. 61.4% of the children who were functioning within age expectations in by the time they turned 3 years of age or exited the program. <p>Outcome B Summary Statements – Acquiring/using knowledge and skills</p> <ol style="list-style-type: none"> 1. 64.1% of the children who <i>entered and exited the program below age expectation substantially increased their rate of growth</i> by the time they turned 3 years of age or exited the program. 2. 60.8% of the children who were functioning within age expectations by the time they turned 3 years of age or exited the program. <p>Outcome C Summary Statements– Use of appropriate behaviors to get needs met</p> <ol style="list-style-type: none"> 1. 71.2% of the children who <i>entered and exited the program below age expectations substantially increased their rate of growth</i> by the time they turned 3 years of age or exited the program. 2. 67.7% of the children who were functioning within age expectations by the time they turned 3 years of age or exited the program.

FFY	Measureable and Rigorous Targets
2010 (2010-2011)	<p>Outcome A Summary Statements – Positive social-emotional skills</p> <ol style="list-style-type: none"> 1. 70% of the children who <i>entered and exited the program below age expectations substantially increased their rate of growth</i> by the time they turned 3 years of age or exited the program. 2. 61.5% of the children who were functioning within age expectations by the time they turned 3 years of age or exited the program. <p>Outcome B Summary Statements – Acquiring/using knowledge and skills</p> <ol style="list-style-type: none"> 1. 64.2% of the children who <i>entered and exited the program below age expectations substantially increased their rate of growth</i> by the time they turned 3 years of age or exited the program.

	<p>2. 60.9% of the children who were functioning within age expectations by the time they turned 3 years of age or exited the program.</p> <p>Outcome C Summary Statements – Use of appropriate behaviors to get needs met</p> <p>1. 71.3% of the children who <i>entered and exited the program below age expectations substantially increased their rate of growth</i> by the time they turned 3 years of age or exited the program.</p> <p>2. 67.8% of the children who were functioning within age expectations by the time they turned 3 years of age or exited the program.</p>
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The SICC and Data Committee reviewed COSF Summary Statement data and discussed the proposed targets presented in this report. Because there still may be data quality issues, the decision to maintain only a 1% increase each year over the next several years seemed reasonable. To address data quality issues, NECTAC and ECO staff will be providing focused training for providers this spring at our annual infant and early childhood conference.

Summary statement baseline data is based on FFY 2008 progress data. Information about the COSF continued to be available at <http://www.dshs.wa.gov/iteip/ChildFamilyOutcomes.html>. Information on how to enter COSF data into the ITEIP DMS continued to be available at <http://www.dshs.wa.gov/iteip/Train.html>. ITEIP program consultants continued to provide onsite targeted technical assistance to LLA staff and providers, as needed.

Improvement Activities/Timelines/Resource:

Improvement Activities Completed in FFY 2008:

The ITEIP DMS was updated to provide more detailed COSF reporting for LLAs and agency/providers. Work was performed on the DMS, to further minimize errors and omissions.
The DMS changes provided ITEIP better data, for analysis, to work with LLAs to correct data inconsistencies.
Provided COSF updates at LLA meetings.

ITEIP reviewed and revised its improvement activities. As part of the evaluation, ITEIP removed improvement activities that it determined were not impacting performance on this indicator, revised improvement activities to better connect them to the indicator, and added additional improvement activities, as determined necessary.

New and Continuing Improvement Activities:

New Improvement Activities	Timelines	Resources
Sponsor COSF workshop at annual Infant and Early Childhood Conference.	2009 -2010	ECO Center and NECTAC staff, ARRA funding

Continuing Improvement Activities	Timelines	Resources
Provide training for LLA administrators in performing periodic random sample reviews of COSFs, for assessing quality and completeness.	2008 - 2010	ITEIP Staff
Utilize data reports that include data, aggregated by LLA, to identify possible data inconsistencies and/or correct data entry problems.	2008 - 2010	SICC and Data Committee & ITEIP Staff
Review data to determine if LLAs are making sufficient progress toward obtaining COSF entry and exit data for all children enrolled in early intervention for at least six months.	2009 - 2010	ITEIP Staff, LLAs, and Service Providers. SICC and Data Committee

**Part C State Annual Performance Report (APR) for FFY 2008
July 1, 2008 through June 30, 2009**

Overview of the Annual Performance Report Development:

See Overview of the APR Development, page 1.

Monitoring Priority: Early Intervention Services in Natural Environments

Indicator 4: Percent of families participating in Part C who report that early intervention services have helped the family:

- A. Know their rights**
- B. Effectively communicate their children's needs**
- C. Help their children develop and learn**

(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement:

- A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.
- B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs) divided by the (# of respondent families participating in Part C)] times 100.
- C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

Applied:

- A. 383 of 476 respondent families participating in Part C reported that early intervention services have helped the family know their rights.
Percent = $(383/476) * 100 = 81\%$
- B. 419 of 476 respondent families participating in Part C reported that early intervention services have helped the family effectively communicate their needs.
Percent = $(419/476) * 100 = 88\%$
- C. 436 of 476 of respondent families participating in Part C who reported that early intervention services have helped them help their child develop and learn
Percent = $(436/476) * 100 = 92\%$

FFY	Measurable and Rigorous Target
2008 (2008-2009)	<ul style="list-style-type: none"> A. At least 77% of families know their rights. B. At least 82% of families effectively communicate their children's needs. C. At least 87% of families help their children develop and learn.

Actual Data for FFY 2008:

- A. **81%** of families know their rights.
- B. **88%** of families effectively communicate their children's needs.
- C. **92%** of families help their children develop and learn.

FFY 2008 family outcome data continued to be collected and reported using the Early Childhood Outcomes Center (ECO) Family Survey. This is the third year ITEIP used the ECO Family Survey to collect and report family outcome data for the APR. ITEIP Family Resources Coordinators (FRCs) requested families complete the ECO Family Survey at **annual IFSP meetings** and **at all exit/transition IFSP meetings** with instructions to complete and return the Family Survey to ITEIP with a stamped envelope that was provided. If a family required interpreter services to complete the survey, an interpreter was available because the distribution occurred at an IFSP meeting. The ITEIP Data Management System continued to allow FRCs to print ECO Family Surveys directly from the system.

Approximately 2002 ECO family surveys were distributed to families between July 1, 2008 and June 30, 2009. Of the survey's that were distributed, 476 ECO Family Surveys were returned to ITEIP with that data used to report on this indicator. This is a 24% return rate of the surveys presented to families. While increasing the survey return rate from FFY 2007, the Family Survey distribution strategy including distribution methods and procedures will need to be evaluated to improve the current return rate.

The representativeness (geographic area, region, race/ethnicity, age of the child, length of program participation, and socio-economic status) of survey respondents was assessed by comparing survey response data with the December 1 Child Count data and other program data.

When considering age of child, children birth – 12 and 24 – 36 months were over represented, children 12 – 24 months were under represented when compared to the December 1 Child Count data. Children ages 36 plus months reflects responses from families of children recently existing program at 36 months. A few families did not provide the age of their child.

When considering ethnicity/race, respondents identifying as white/Caucasian were over represented compared to the December 1 Child Count data. Hispanic and African American families were under represented with Hispanic families more significantly under represented than African American families when compared to the December 1 Child Count data. While under represented, Asian/Pacific Islander and Multiracial families were more comparable to December 1 Child Count data.

Of the families who responded to the survey, 100 families or 21.4% reported receiving services for 1 to 6 months, 152 or 33% reported receiving services for 6 to 12 months, and 215 or 46% reported receiving services for 12 months or longer.

Of the families who responded to the survey, 53% reported being enrolled in Medicaid with 47% not being enrolled – approximately 3% did not respond to this question. Of the families enrolled in early intervention, 55% reported to be enrolled in Medicaid with 43% reported not enrolled – approximately 2% did not respond. Medicaid families were under represented and non-Medicaid families were over represented when compared to all families with children determined eligible for early intervention services.

Age of Child	Survey Responses	December 1, 2009 Child Count
Birth – 12 months	1.6%	9%
12 – 24 months	19.8%	30%
24 – 36 months	69.3%	61%
36 + months	7.9%	
No response	1.4%	

Race/Ethnicity	Survey Responses	December 1, 2009 Child Count
White	65%	54%
Hispanic	12%	20%
Asian/Pacific Islander	5%	6%
African American	2%	4%
Native American	1%	2%
Multiracial	15%	14%

Length of time in early intervention	Survey Responses
1-6 months	21%
6-12 months	33%
Longer than 12 months	46%

Medicaid Eligible Children

Families That Completed the Survey	Medicaid Eligible Enrolled in ITEIP
Yes 53%	Yes 55%
No 47%	No 43%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:**Improvement Activities Completed FFY 2008:**

Family leadership training continued to be supported through the work of two part-time Parent Participation Coordinators. The Washington State's Parent Training and Information Center (Washington Parents Are Vital in Education [PAVE]) continued to administer the ITEIP Parent Participation Coordination contract.

Implemented ECO Family Survey dissemination policies and procedures.

Continued to follow ECO Family Survey distribution procedures that required it be completed at each Annual IFSP and Transition Planning Conference.

Revisions (With Justification) to Proposed Targets/Improvement Activities/Timelines/Resources:

Improvement strategies that will continue to be implemented include:

Continuing Activities for FFY 2009:

Activities	Timelines	Resources
Technical assistance and training in developing individualized programs and services to better meet ECO Family Outcomes.	2009 - 2010	ITEIP and technical assistance staff
Technical assistance and training in administering and distributing the ECO Family Survey.	2009 - 2010	ITEIP and technical assistance staff
Consider revision of ECO Family Survey dissemination policies and procedures to improve return rate.	2008 - 2010	ITEIP and technical assistance staff

**Part C State Annual Performance Report (APR) for FFY 2008
July 1, 2008 through June 30, 2009**

Overview of the Annual Performance Report Development:

See Overview of the APR Development, page 1.

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 5: Percent of infants and toddlers, birth to 1, with IFSPs compared to national data.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

- A. Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to the same percent calculated for other States with similar (narrow, moderate or broad) eligibility definitions.
- B. Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to National data.

Applied:

410 infants and toddlers birth to 1 with IFSPs (Based on day in time count.)
 88,921 infants and toddlers birth to 1 in the state (Data Source: Center for Health Statistics, Washington State Department of Health, November 2008.)
 Percent = (410/88,921) * 100 = **0.46%**

FFY	Measurable and Rigorous Target
2008 (2008-2009)	0.90% of Washington State's infants under the age of 12 months will be identified and determined eligible for early intervention services.

Actual Target Data for FFY 2008:

0.46% of Washington State's infants under the age of 12 months were identified and determined eligible for early intervention services.

This is based upon the December 1, 2008 day in time count of children for 2008, as reported in "Table C-9 Percent of infants and toddlers receiving early intervention services under IDEA, Part C, by age and state: 2008."

- A. Other states with similar eligibility definitions
Not required.
- B. Comparing Washington State and National Data:

During FFY 2008, based upon the data provided by the U.S. Department of Education and U.S. Bureau of the Census, 1.04% of all infants, birth to 1 year, in the 50 states and Washington D.C. were identified and determined eligible for early intervention services. When comparing Washington State's 0.46% of infants, birth to 1 year who were identified and determined eligible,

to the national average of 1.04%, Washington State serves 0.58% less or less than half of the national average.

When compared to the national average, Washington State ranked next to the last among the 50 States and D.C., with Washington DC ranked last at 0.36%. During FFY 2007, Washington State ranked 48th.

Data Source: U.S. Department of Education, Office of Special Education Programs, Data Analysis System (DANS) OMB 3 1820-0557, "Infants and Toddlers Receiving Early Intervention Services in Accordance with Part C," 2008. Data updated as of August 3, 2009. U.S. Bureau of the Census. Population data for August 2009 accessed from http://www.census.gov/popest/states/asrh/files/SC_EST2006_AGESEX_RES.csv.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

The data percentage decreased slightly (0.07%), from FFY 2007. ITEIP did not meet its FFY 2008 percentage target. The number of infants, birth to 1 year, served in Washington State decreased 48, from 458 in FFY 2007 to 410 in FFY 2008; and the population of infants and toddlers, birth to age one, in the state increased 2,076, from 86,845 in FFY 2007 to 88,921 in FFY 2008. (*Data Source: Center for Health Statistics, Washington State Department of Health, November 2008.*)

During FFY 2008, ITEIP has identified several reasons for the continuing low percentage of infants, birth to 1 year being identified and made eligible for early intervention services.

Some reasons may include:

- The way data is entered into the system the ITEIP Data Management System (DMS) may be promoting eligibility determinations that are based on test scores rather than a diagnosed condition.
- Physician screening protocols promote initial formal developmental screening (Ages & Stages Questionnaire) occur at 9 months which may result in subsequent referrals to early intervention occurring closer to or after the age of 12 months.
- Physician "wait and see" approach may delay referrals to early intervention.
- Hospital based therapy programs and private therapy clinics that provide services for infants transitioning from neonatal intensive care units may not be referring these children to early intervention until private insurance has been exhausted

Based upon the reasons identified above, ITEIP developed an Evaluation/Assessment Practice Guide that provided clarifying information about the appropriate use of a diagnosed physical or mental condition in making an efficient eligibility decision. Technical assistance was provided to Family Resources Coordinators and Local Lead Agency administrators on how to utilize the existing DMS fields to enter diagnose condition information. Data System improvements will include more explicit directions and appropriate data fields for entering diagnosed condition eligibility information. ITEIP staff are currently meeting with Department of Health and other interested stakeholder to develop and plan the implementation of universal screening procedures for children starting at birth. An ITEIP outreach plan to hospitals and clinics will need to be developed if a more collaborative approach to service provision is to be developed and implemented.

Improvement Activities Completed FFY 2008:

The SICC Data Committee continues to review the data for this indicator to identify the issues related to not meeting target.

A report was presented, at the January 2009 SICC Meeting, addressing possible reasons for not identifying infants birth to 1 year old. The report cited that infants with chronic health conditions, identified at birth, frequently are served through hospital or clinic based programs, until private insurance has been fully expended. Once that occurs, older infants or toddlers may then be referred to the public early intervention program. The Public Policy Ad Hoc Sub-Committee (PPC) recommended that the PPC be expanded to include statewide participants, including service providers and parents, to provide a

methodology proposal to the SICC on birth to 1 year (Indicator 5) with an IFSP.
The SICC Personnel and Training Committee conducted an informal survey of private therapists and hospital-based pediatric therapy clinics not participating in the state Part C Program and who serve the most populated regions of the state. The informal survey was to identify some of the factors that contributed to the low number of infants (birth to 1 year) being referred to early intervention over the past year. Survey information will be used to develop future state and local implementation strategies.
Provided outreach to the Washington State Department of Social and Health Services (DSHS), Children's Administration for the purpose of increasing Child Find to infants and toddlers in foster care. Child Health Education Tracking staff continued to screen all children, birth to three, placed in foster care over 30 days, and referred to a Family Resources Coordinator or ITEIP any child who demonstrated a concern.
Met with Department of Early Learning (DEL) staff to increase their awareness of Part C services and to enhance coordination of Child Find and other early childhood activities.
Continued to provide targeted public awareness to parents/families, physicians, child care providers, and other child serving agencies to enlist their assistance in identifying and developing Child Find improvement strategies and activities.
Worked with other state agency partners to submit a federal Assuring Better Child Health and Development Initiative (ABCD) III Grant to the National Academy for State Health Policy. Washington did not receive the grant, but the core group continues to explore other options to develop and fund a statewide universal screening program.

Revisions (With Justification) to Proposed Targets/Improvement Activities/Timelines/Resources:

ITEIP reviewed and added several improvement activities.

New and Continuing Improvement Activities:

New Activities	Timelines	Resources
With stakeholder involvement, assist in and support the development of a statewide universal screening system for children, birth to age eight.	2009 – 2010	ITEIP, Medical Home Leadership Network, participating state agencies, and ARRA Funding
Develop and implement a new outreach plan to physicians, hospitals and clinics for the purpose of developing a more collaborative approach to referral and service provision	2010 – 2011	ITEIP, LLAs. Medical Home Leadership Network, CSHCN/DOH

Continuing Activities	Timelines	Resources
Improve data analysis.	2008 – 2010	ITEIP and Local Lead Agencies (LLAs).
Work with the state Medical Home Leadership Network and Department of Health's Children with Special Health Care Needs staff to increase awareness among medical provider agencies/programs, to assist in identifying outreach strategies to the medical community.	2008 – 2010	ITEIP, Medical Home Leadership Network, and LLAs

Data sharing project with the Department of Health's (DOH's) Early Hearing Loss Detection, Diagnosis, and Intervention (EHDDI) program to ensure infants with hearing loss are not lost to follow-up.	2009-2010	ITEIP and DOH/EHDDI
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**Part C State Annual Performance Report (APR) for FFY 2008
July 1, 2008 through June 30, 2009**

Overview of the Annual Performance Report Development:

See Overview of the APR Development, page 1.

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 6: Percent of infants and toddlers, birth to 3, with IFSPs compared to national data.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to National data.

Applied:

4,906 infants and toddlers, birth to 3, with IFSPs

258,391 infants and toddlers, birth to 3 (Source: Center for Health Statistics, Washington State Department of Health, November 2008.)

Percent = (4906/258,391) * 100 = **1.9%**

FFY	Measurable and Rigorous Target
2008 (2008-2009)	2.0% of Washington State's infants and toddlers, birth to three, will be identified and determined eligible for early intervention services.

Actual Target Data for FFY 2008:

1.9% of Washington State's infants and toddlers were identified and determined eligible for early intervention services. Washington improved from 1.83% in FFY 07 to 1.9% in FFY 08, but did not meet its target of 2.0%.

This is based upon the December 1, 2008 day in time count of children for 2008, as reported in "Table C-9 Percent of infants and toddlers receiving early intervention services under IDEA, Part C, by age and state: 2008."

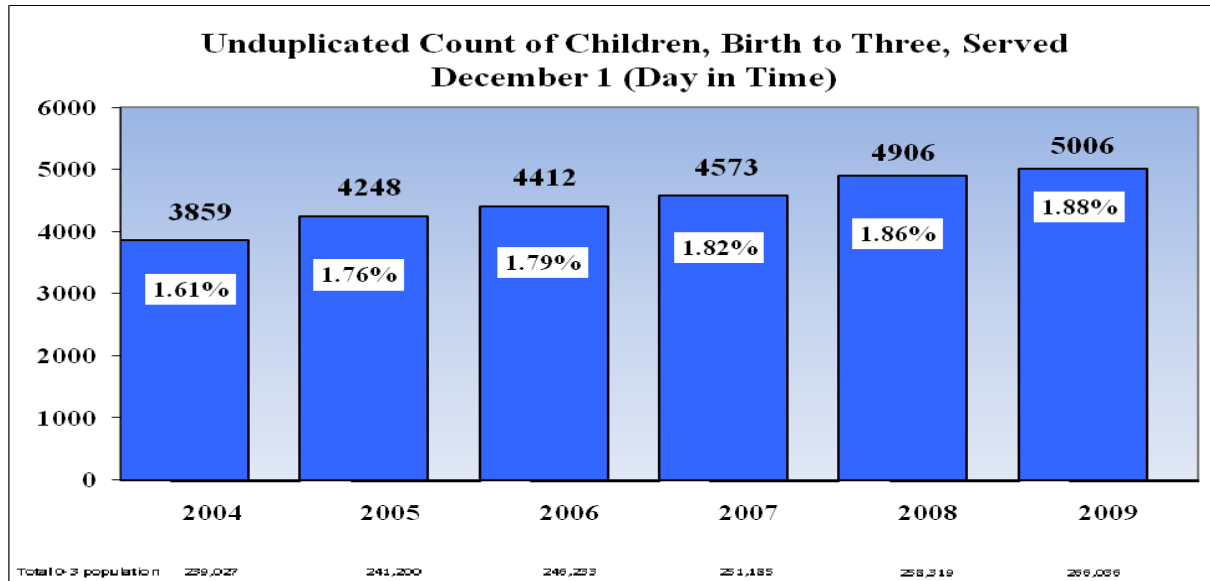
Comparing Washington State and National Data:

Based upon the estimated data provided by the U.S. Department of Education and U.S. Bureau of the Census, during FFY 2008, on average, 2.66% of all infants and toddlers, birth to three, in the 50 States, Washington D.C., and outlying areas were identified and determined eligible for early intervention services. When comparing Washington State's 1.90% of infants and toddler served to the national average of 2.66% infants and toddlers served, Washington State was 0.76% below the national average.

Data Source: U.S. Department of Education, Office of Special Education Programs, Data Analysis System (DANS) OMB 3 1820-0557, "Infants and Toddlers Receiving Early Intervention Services in Accordance with Part C," 2008. Data updated as of August 3, 2009. U.S. Bureau of the Census.

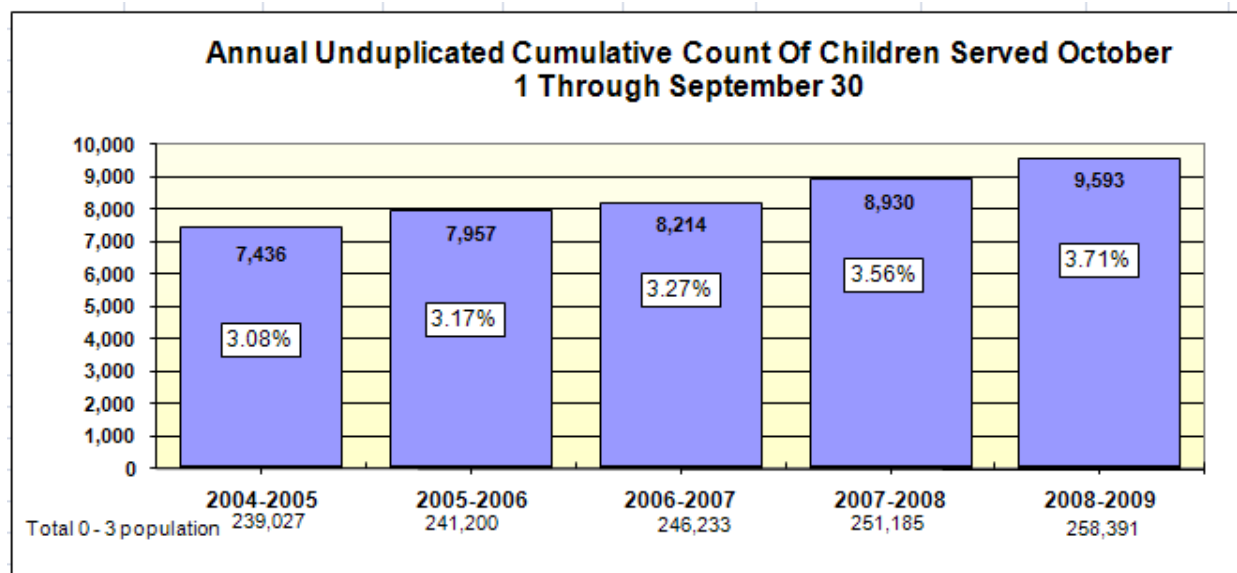
ITEIP collected data for this indicator each quarter and shared the data with Local Lead Agencies (LLAs). During the year, the data was also reported at State Interagency Coordinating Council (SICC) meetings. Periodically throughout the year, the SICC Data Committee also reviewed data for this indicator. ITEIP and the SICC continued to review referral source and family issues impacting local Child Find efforts. ITEIP is also examining why determining eligibility based on a diagnosed physical or medical condition that has a high probability of resulting in delay is being underutilized. Over the coming year, issues impacting physician and related health care provider referrals to early intervention will continue to be analyzed by ITEIP and the SICC.

The following charts compare over time the number and percentage of children served, birth to three:



The December 1, 2009 (Day in Time) unduplicated child count identified 5,006 birth to three children were served by ITEIP or 1.9% of Washington's birth to three population.

In FFY 2008, based on the cumulative child count, ITEIP served approximately 9,593 or 3.71% of its total birth to three population. The annual unduplicated cumulative child count for FFY 2004 through 2009 is given in the bar graph below.



Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

ITEIP's 1.9% data represents a decrease of .02 % from its FFY 2007 data of 1.95%. ITEIP did not meet its FFY 2008 target of 2.0% despite the significant number of child find activities improvement completed (see improvement activities completed below).

ITEIP continued to require LLAs to distribute public awareness materials, as part of their contractual agreement with ITEIP. ITEIP tracked the distribution of these materials statewide and used this information to identify any trends and patterns affecting referral and/or early identification efforts. Targeted public awareness to parents/families, physicians, child care providers, Children's Administration, and Medicaid providers occurred.

Improvement Activities Completed FFY 2008:

Targeted Child Find outreach and training was provided to the following agencies and organizations:

Children's Administration (CA) State Academy Training staff

Health and Recovery Services Administration staff

Division of Developmental Disabilities new Case Managers

Department of Early Learning staff and partner agencies

Health Maintenance Organizations

State Medicaid Healthy Options Plans

Audiologists and allied health providers

Washington State Parent and Family Support Organizations

Collaborated with DOH to develop Child Health Notes on health and disability related conditions for local medical communities.

ITEIP and the Department of Health (DOH), local health departments, and Children with Special Health Care Needs (CSHCN) programs continued to coordinate many activities related to early identification and screening of children, birth to three, with disabilities or developmental delays, and their families.

ITEIP referral and other program information was updated to include DOH activities, such as Washington State Medical Home physician trainings and Grand Rounds; Parent Help 123 website, an initiative of Within Reach (ITEIP's Central Directory) continues operation. This online application enables families to find out if they are eligible for insurance and food programs in Washington State. When using this system, if a developmental concern is noted, the family is referred to the Family Health Hotline for referral to ITEIP and the local Family Resources Coordinator.

ITEIP continued to work with DOH staff to collaboratively share Medical Home resource materials and outreach information to medical and health care providers. A link to the Medical Home Leadership Network (MHLN) website now includes developmental surveillance and screening information and also provides information on how to refer into the Part C early intervention system. ITEIP and MHLN staff work together to keep information about the referral process to Part C services current and accurate. ITEIP distributed the DOH published Autism Guidebook for Washington State to LLAs and other interested stakeholders. The Guidebook provided information on referral processes, services, and resources available throughout the state.

Revisions (With Justification) to Proposed Targets/Improvement Activities/Timelines/Resources:

ITEIP reviewed and evaluated its improvement activities and determined with the addition of ARRA funds, new activities could be supported.

Continuing Improvement Activities:

Activities	Timelines	Resources
Provide Part C training at annual Washington Association of School Administrators (WASA) Conference - Early Childhood Day	2008 – 2010	OSPI/Special Education and ITEIP
Introduction to Early Intervention training for new Division of Developmental Disabilities (DDD) Case Managers	2008 – 2010	DDD and ITEIP staff
Annual Developmental Disabilities Council Leadership Training	2008 – 2010	DDC and ITEIP staff
LLAs to improve and expand local Child Find activities and efforts where needed.	2009 – 2010	ARRA funding and ITEIP staff
Improve data analysis.	2008 – 2010	ITEIP and LLAs
Improve collaboration/coordination with medical community.	2008 – 2010	ITEIP and LLAs

**Part C State Annual Performance Report (APR) for FFY 2008
July 1, 2008 through June 30, 2009**

Overview of the Annual Performance Report Development:

See Overview of the APR Development, page 1.

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 7: Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent = [(# of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline) divided by the (# of eligible infants and toddlers evaluated and assessed)] times 100.

Account for untimely evaluations, assessments, and initial IFSP meetings, including the reasons for delays

Applied:

2,304 eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline

2,331 eligible infants and toddlers evaluated and assessed

Percent = (2304/2331) * 100 = **99%**

FFY	Measurable and Rigorous Target
2008 (2008-2009)	100% of eligible infants and toddlers with IFSPs had an evaluation/assessment and initial IFSP meeting within Part C's 45-day timeline.

Actual Target Data for FFY 2008:

- A. **99%** of infants and toddlers with IFSPs had an evaluation/assessment and initial IFSP meeting was conducted within Part C's 45-day timeline. Of the infants and toddlers with IFSPs that met the timely evaluation, assessment, and initial IFSP requirement:
 1. 86% or 2,012 of 2,331 infants and toddlers with IFSPs had an evaluation/assessment and initial IFSP meeting within Part C's 45-day timeline; and,
 2. 13% or 292 of 2,331 infants and toddlers with IFSPs had an evaluation/assessment and initial IFSP meeting that did not meet Part C's 45-day timeline, due to exceptional family circumstances.
- B. **1%** or 27 of 2,331 infants and toddlers with IFSPs did not have an evaluation/assessment and initial IFSP meeting that met Part C's 45-day timeline, *due to reason other than exceptional family circumstance* and included:

- Difficulty arranging phone calls and meetings with interpreters
- Data entry errors
- Staff and family schedule conflicts

For FFY 2008, there was a change in the way data was collected for this indicator because data for this indicator is from the Data Management System (DMS), which is a significantly larger pool of children than prior years and more accurately reflects Local Lead Agency (LLA) performance. Therefore, FFY 2008 data is not comparable to data previously collected and reported. Compliance data for Indicator 1 was obtained from all IFSPs entered into the ITEIP DMS, from April 1 through June 30, 2009. Prior to FFY 2008, ITEIP obtained data for this indicator from onsite monitoring visits.

During FFY 2008, ITEIP enhanced its DMS, by developing a detailed compliance report to ensure data accuracy. This report provided an additional data analysis tool to identify and correct data entry errors, review individual child status, and identify the need for additional technical assistance.

Correction of Noncompliance Related to Indicator 7:

FFY	Number of Findings of Noncompliance Related to Indicator 7	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified
FFY 2005	1	0	1 (2008)
FFY 2006	5	4	1 (2008)
FFY 2007	3	3	0
FFY 2008	7	To be reported in the FFY 2009 APR	

To verify correction of noncompliance, ITEIP staff reviewed DMS data for each LLA to verify that: (1) all children (who remained within jurisdiction of the program) received an IFSP meeting, although late; and (2) current data reflects that the LLA is meeting the requirement to provide all services timely. In order to demonstrate the requirement is met, one month of data must demonstrate that 100% of services were provided timely.

FFY 2005 uncorrected noncompliance that was verified as corrected in FFY 2008 – For the LLA with uncorrected noncompliance, the following activities, including sanctions and enforcements were taken and the noncompliance subsequently was verified as corrected:

- A. Revised Corrective Action Plan
- B. Required receipt of technical assistance

NOTE: Beginning in FFY 2008 there is a new Local Lead Agency (LLA), for this geographic area. The new LLA is aware of this compliance requirement and has received technical assistance.

FFY 2006 uncorrected noncompliance that was verified as corrected in FFY 2008 – For the LLA with uncorrected noncompliance, the following activities, including sanctions and enforcements were taken and the noncompliance subsequently was verified as corrected:

- A. Revised Corrective Action Plan
- B. Required receipt of technical assistance
- C. Frequent site visits

FFY 2007 – All LLAs with Indicator 7 findings of noncompliance identified during onsite monitoring visits, occurring April 1, 2008 through June 30, 2008, were corrected no later than one year from when identified

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage for FFY 2008:

Determination: Needs Assistance – Year 2:

Technical assistance continued to be accessed from the Regional Resource Center's Program website's SPP/APR Calendar, the National Early Childhood Technical Assistance Center website, Western Regional Resource Center (WRRRC), and the National Early Childhood Technical Assistance Center (NECTAC). ITEIP requested and received onsite technical assistance from WRRRC and NECTAC staff in June of 2009. The technical assistance focused on strengthening ITEIP's system of general supervision, including monitoring and the identification and correction of noncompliance.

Based on the technical assistance received, the following actions were taken and included,

- Enhanced Data Management System (DMS) data collection and analysis
- Developed and implemented a new DMS detailed compliance report with data drill down capacity
- Established process for reviewing DMS data for annual monitoring, including identifying noncompliance, the root cause of noncompliance, and required corrective actions, prior to issuing written notification of findings"
- Provided policy clarification and guidance
- Provided targeted technical assistance

For Indicator 7, progress was made in moving closer to full compliance .

During FFY 2008, annual compliance data was shared at LLA quarterly meetings, SICC and committee meetings. As required, it was also posted on the ITEIP website. Primary strategies ITEIP used to focus improvement efforts included:

1. Provision of targeted technical assistance based upon LLA determination status.
2. Enhanced training and technical assistance by contracting with two (2) early intervention consultants with assessment and service provision expertise. LLAs determined to need assistance and/or need intervention were prioritized to receive consultant services.
3. Provided formal training (offering clock hours) at LLA quarterly meetings.
4. Developed and disseminated an Evaluation/Assessment Practice Guide that was reviewed by NECTAC staff. The guide promoted evaluation/assessment and eligibility practices that resulted in more efficient eligibly decisions and the provision of timely services.
5. Required one (1) LLA to submit a monthly compliance data report and analysis until full correction occurred.

Over the past year, ITEIP increased its capacity to collect and analyze Indicator 7 data through the enhancements that were made to the DMS. Due to DMS improvements, LLAs and ITEIP were able to utilize IFSP detailed compliance reports to assess the provision of timely evaluations, assessments, and initial IFSP meetings, within a specified timeframe, for identified providers, by each Family Resources Coordinator (FRC) and by child. With this information, LLAs were able to analyze their own data and make needed correction. ITEIP also provided targeted technical assistance, when needed. Periodic review of compliance indicator data enabled ITEIP to strengthen its ability to ensure timely correction of noncompliance occurred.

Improvement Activities Completed FFY 2008:

LLA contract language maintained compliance and performance reporting requirements. LLAs were required to report on their progress in meeting this compliance indicator. Developed an evaluation, assessment, and initial IFSP Practice Guide to provide the guidance necessary to increase compliance.

Continued to utilize quarterly LLA contractor meetings to share information and to provide training and technical assistance related to this indicator. Each agenda included time to review and discuss SPP/APR compliance and performance data.
The ITEIP DMS was enhanced to produce detailed compliance data reports for program monitoring, data review, and technical assistance purposes.
Provided training on school district required participation in early intervention by September 1, 2009 at the annual Office of the Superintendent of Public Instruction and Washington Association of School Administrators summer conference.
Monitored mediation requests, citizen's complaints, and administrative hearings for compliance with the early childhood transition requirements. During this report timeframe, there were no formal complaints, mediation, or administrative hearing requests filed.

Revisions (With Justification) to Proposed Targets/Improvement Activities/Timelines/Resources:

ITEIP evaluated its improvement activities and determined it will continue to implement identified improvement activities.

Continuing Improvement Activities:

Activities	Timelines	Resources
Convene quarterly LLA contractor meetings.	2008 – 2010	ITEIP
Monitor mediation requests, citizen's complaints, and administrative hearings, for compliance with the timely evaluation, assessment, and IFSP meeting requirements.	2008 – 2010	ITEIP
Use ITEIP DMS compliance report to perform desk audits and to perform periodic compliance data review.	2008 – 2010	ITEIP and LLAs
Provide evaluation and assessment best practices training and technical assistance.	2009 - 2010	ITEIP program consultants and technical assistance contractors

**Part C State Annual Performance Report (APR) for FFY 2008
July 1, 2008 through June 30, 2009**

Overview of the Annual Performance Report Development:

See Overview of the APR Development, page 1.

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Indicator 8: Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:

- A. IFSPs with transition steps and services;**
- B. Notification to the Local Education Agency (LEA), if child potentially eligible for Part B; and**
- C. Transition conference, if child is potentially eligible for Part B.**

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

- A. Percent = [(# of children exiting Part C who have an IFSP with transition steps and services) divided by the (# of children exiting Part C)] times 100.
- B. Percent = [(# of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.
- C. Percent = [(# of children exiting Part C and potentially eligible for Part B where the transition conference occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.

Account for untimely transition conferences, including reasons for delays.

Applied:

- A. Percent = (1376/1389) * 100 = **99%**
- B. Percent = (1176/1225) * 100 = **96%**
- C. Percent = (1360/1383) * 100 = **98%**

FFY	Measurable and Rigorous Target
2008 (2008-2009)	<ul style="list-style-type: none"> A. 100% of children exiting Part C will have IFSPs that have transition steps and services. B. 100% of LEAs will be notified if the child is potentially eligible for Part B. C. 100% of children potentially eligible for Part B special education services will have a transition conference.

Actual Target Data for FFY 2008:

1,389 IFSPs were reviewed for Indicator 8 A, B, and C transition requirements with the following results:

- A. **99%** or 1,376 children exiting Part C had IFSPs *with transition steps and services*.
1% of children exiting Part C did not have IFSPs with transition steps and services.
- B. **96%** or 1,176 LEAs received a transition notice if the child was potentially eligible for Part B.
4% of LEAs did not receive a required transition notice.
- C. **98%** or 1,360 children potentially eligible for Part B special education services had a timely transition planning conference.
 1. 89% of potentially eligible children had a timely transition conference and
 2. 10% of potentially eligible children had a late transition conference *due to exceptional family circumstances*.

2% potentially eligible children transitioned with IFSPs containing documentation that verified a transition conference occurred late for reasons *other than exceptional circumstance* included the following:

- Provider hospitalization
- Therapist scheduling error
- Interpreter not available

Correction of Noncompliance Related to Indicator 8A:

FFY	Number of Findings of Noncompliance Related to Indicator 8A	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified
FFY 2004	1	0	1 (2006)
FFY 2005	2	2	0
FFY 2006	2	2	0
FFY 2007	1	1	0
FFY 2008	3	To be reported in FFY 2009 APR	

In addition to verifying correction of the findings of noncompliance, ITEIP ensured all individual instances of noncompliance were corrected.

To verify correction of noncompliance, ITEIP staff reviewed Data Management System (DMS) data for each Local Lead Agency (LLA) to verify that: (1) all children (who remained within jurisdiction of the program) received an IFSP meeting, although late; and (2) current data reflects that the LLA is meeting the requirement to provide all services timely. In order to demonstrate the requirement is met, one month of data must demonstrate that 100% of services were provided timely.

FFY 2004 uncorrected noncompliance that was verified as corrected in FFY 2006 – For the LLAs with uncorrected noncompliance, the following activities, including sanctions and enforcements were taken and the noncompliance subsequently was verified as corrected:

- A. Revised Corrective Action Plan
- B. Required receipt of technical assistance

Correction of Noncompliance Related to Indicator 8B:

FFY	Number of Findings of Noncompliance Related to Indicator 8B	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified
FFY 2004	0	0	0
FFY 2005	0	0	0
FFY 2006	2	2	0
FFY 2007	0	0	0
FFY 2008	0	To be reported in FFY 2009 APR	

In addition to verifying correction of the findings of noncompliance, ITEIP ensured all individual instances of noncompliance were corrected.

To verify correction of noncompliance, ITEIP staff reviewed DMS data for each LLA to verify that: (1) all children (who remained within jurisdiction of the program) received an IFSP meeting, although late; and (2) current data reflects that the LLA is meeting the requirement to provide all services timely. In order to demonstrate the requirement is met, one month of data must demonstrate that 100% of services were provided timely.

Correction of Noncompliance Related to Indicator 8C:

FFY	Number of Findings of Noncompliance Related to Indicator 8C	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified
FFY 2004	1	0	1 (2006)
FFY 2005	3	1	2 (2007)
FFY 2006	3	2	1 (2008)
FFY 2007	4	4	0
FFY 2008	8	To be reported in FFY 2009 APR	

In addition to verifying correction of the findings of noncompliance, ITEIP ensured all individual instances of noncompliance were corrected.

To verify correction of noncompliance, ITEIP staff reviewed DMS data for each LLA to verify that: (1) all children (who remained within jurisdiction of the program) received an IFSP meeting, although late; and (2) current data reflects that the LLA is meeting the requirement to provide all services timely. In order to demonstrate the requirement is met, one month of data must demonstrate that 100% of services were provided timely.

FFY 2004 uncorrected noncompliance that was verified as corrected in FFY 2006 – For the LLAs with uncorrected noncompliance, the following activities, including sanctions and enforcements were taken and the noncompliance subsequently was verified as corrected:

- A. Revised Corrective Action Plan
- B. Required receipt of technical assistance

FFY 2005 uncorrected noncompliance that was verified as corrected in FFY 2007 – For the LLAs with uncorrected noncompliance, the following activities, including sanctions and enforcements were taken and the noncompliance subsequently was verified as corrected:

- A. Revised Corrective Action Plan
- B. Required receipt of technical assistance

NOTE: Beginning in FFY 2008 there is a new LLA, for this geographic area. The new LLA is aware of this compliance requirement and has received technical assistance.

FFY 2006 uncorrected noncompliance that was verified as corrected in FFY 2008 – For the LLA with uncorrected noncompliance, the following activities, including sanctions and enforcements were taken and the noncompliance subsequently verified as corrected:

- A. Revised Corrective Action Plan
- B. Required receipt of technical assistance
- C. Frequent site visits

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

Determination: Needs Assistance – Year 2:

For FFY 2008, there was a change in the way data was collected for this indicator because data for this indicator is from the DMS, which is a significantly larger pool of children than prior years, and more accurately reflects LLA performance. Therefore, FFY 2008 data is not comparable to data previously collected and reported. Compliance data for Indicator 8A, B, and C was obtained from all transition IFSPs entered into the ITEIP DMS, from April 1 through June 30, 2009. Prior to FFY 2008, ITEIP obtained data for this indicator from onsite monitoring visits.

During FFY 2008, ITEIP enhanced its DMS, by developing a detailed compliance report to ensure data accuracy. This report provided an additional data analysis tool to identify and correct data entry errors, review individual child status, and identify the need for additional technical assistance.

Technical assistance continued to be accessed from:

- A. Regional Resource Center's Program website SPP/APR calendar
- B. National Early Childhood Technical Assistance Center website resources
- C. Western Regional Resource Center staff (Arlene Russell)
- D. National Early Childhood Technical Assistance Center staff (Anne Lucas)

ITEIP requested and received in April 2009 onsite technical assistance from WRRRC and NECTAC staff. The technical assistance focused on strengthening ITEIPs system of general supervision including monitoring and the identification and correction of noncompliance.

Based on the technical assistance received, the following actions continued to be taken and included,

- A. Developed enhanced data collection and analysis tools, via the ITEIP DMS
- B. Developed and implemented a new DMS detailed compliance report with data drill down capacity
- C. Established process for reviewing DMS data for annual monitoring including identifying noncompliance, the root cause of noncompliance, and required corrective actions prior to issuing written notification of findings"
- D. Provided policy clarification and guidance
- E. Provided targeted technical assistance

Discussion of progress and slippage will occur in next year's APR when data will be more comparable.

During FFY 2008, annual compliance data was shared at LLA quarterly meetings, SICC and committee meetings. As required, it was also posted on the ITEIP website. Primary strategies ITEIP used to focus

improvement efforts included the increased use of data in making program improvement decisions and providing technical assistance that included:

- A. Provision of targeted technical assistance based upon LLA compliance data.
- B. Enhanced training and technical assistance by contracting with two (2) early intervention consultants with assessment and service provision expertise. LLAs determined to need assistance and/or need intervention were prioritized to receive consultant services.
- C. Provided formal training (offering clock hours) at LLA quarterly meetings.

Over the past year, ITEIP increased its capacity to collect and analyze Indicator 8A, 8B, and 8C data through ITEIP DMS tools – primarily the detailed compliance report. Due to these DMS improvements, LLAs and ITEIP were able to use this information to assess the provision of timely and appropriate transition services and meetings, within a specified timeframe, for identified providers, by each Family Resources Coordinator (FRC) and individual child. With this information, LLAs were able to analyze their own data and make needed corrections on an individual child basis. ITEIP also provided targeted technical assistance when needed. Periodic review of compliance indicator data enabled ITEIP to strengthen its ability to ensure timely correction of noncompliance occurred.

Improvement Activities Completed FFY 2008:

LLA contract language maintained compliance and performance reporting requirements. LLAs were required to report on their progress in meeting this compliance indicator. Developed an evaluation, assessment, and initial IFSP Practice Guide to provide the guidance necessary to increase compliance.

ITEIP continued to utilize quarterly LLA contractor meetings to share information and to provide training and technical assistance related to this indicator.

The ITEIP DMS was enhanced to produce a detailed compliance data report for program monitoring, data review purposes, and technical assistance purposes.

During FFY 2008, ITEIP provided targeted technical assistance on Indicators 8A, 8B, and 8C utilizing the DMS detailed compliance report.

Monitored mediation requests, citizen's complaints, and administrative hearings for compliance with the early childhood transition requirements. During this report timeframe, there were no formal complaints, mediation, or administrative hearing requests filed.

Revisions (With Justification) to Proposed Targets/Improvement Activities/Timelines/Resources:

ITEIP reviewed evaluated its improvement activities, will continue to implement identified activities, and added one more improvement activity.

Continuing and New Improvement Activities:

Activities	Timelines	Resources
Co-present on early childhood transition requirements and effective practices.	2008 - 2010	ITEIP and OSPI
Convene quarterly LLA contractor meetings.	2008 - 2010	ITEIP
Monitor mediation requests, citizen's complaints, and administrative hearings for compliance with the timely early childhood transition requirements.	2008 - 2010	ITEIP
Use ITEIP DMS compliance report to review data and provide focus technical assistance.	2008 - 2010	ITEIP and LLAs
Discuss compliance data at LLA quarterly meetings, SICC and its Committee meetings, and with early intervention funding sources administrators	2008 - 2010	ITEIP and LLAs
Develop practice guide on timely and effective early childhood transition practices.	2009-2010	ITEIP, NECTAC, and NECTC

**Part C State Annual Performance Report (APR) for FFY 2008
July 1, 2008 through June 30, 2009**

Overview of the Annual Performance Report Development:

See Overview of the APR Development, page 1.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 9: General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible, but in no case later than one year from identification.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent of noncompliance corrected within one year of identification:

- A. # of findings of noncompliance.
- B. # of corrections completed as soon as possible, but in no case later than one year from identification.

Percent = [(b) divided by (a)] times 100.

Applied:

- A. Nine (9) findings of noncompliance
- B. Nine (9) findings corrected as soon as possible, but no later than one year from identification

Percent = (9/9) * 100 = **100%**

FFY	Measurable and Rigorous Target
2008 (2008-2009)	100% of noncompliance is corrected within one year of identification.

Response to OSEPs June 1, 2009 Response Table:

Of the fifteen (15) findings of noncompliance identified in FFY 2006, thirteen (13) were corrected within one year of identification and the remaining two (2) findings were corrected by the submission of FFY 2007 APR, in February 2009.

Actual Target Data for FFY 2008:

100% of noncompliance was corrected within one year of identification.

Changes were made to Washington's Part C monitoring system. ITEIP is now making findings based upon monitoring data obtained from the ITEIP Data Management System (DMS). ITEIP continued to strengthen its general supervision system, by providing enhanced compliance monitoring and targeted technical assistance.

INDICATOR C-9 WORKSHEET

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2007 (7/1/07 to 6/30/08)	(a) # of Findings of noncompliance identified in FFY 2007 (7/1/07 to 6/30/08)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
1. Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	1
	Dispute Resolution: Complaints, Hearings	0	0	0
2. Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
3. Percent of infants and toddlers with IFSPs who demonstrate improved outcomes	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
4. Percent of families participating in Part C who report that early intervention services have helped the family	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2007 (7/1/07 to 6/30/08)	(a) # of Findings of noncompliance identified in FFY 2007 (7/1/07 to 6/30/08)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
	Dispute Resolution: Complaints, Hearings	0	0	0
5. Percent of infants and toddlers birth to 1 with IFSPs	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
6. Percent of infants and toddlers birth to 3 with IFSPs		0	0	0
7. Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	3	3	3
	Dispute Resolution: Complaints, Hearings	0	0	0
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	1	1	1
A. IFSPs with transition steps and services;	Dispute Resolution: Complaints, Hearings	0	0	0
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0

Indicator/Indicator Clusters	General Supervision System Components	# of EIS Programs Issued Findings in FFY 2007 (7/1/07 to 6/30/08)	(a) # of Findings of noncompliance identified in FFY 2007 (7/1/07 to 6/30/08)	(b) # of Findings of noncompliance from (a) for which correction was verified no later than one year from identification
birthday including: B. Notification to LEA, if child potentially eligible for Part B	Dispute Resolution: Complaints, Hearings	0	0	0
8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including: C. Transition conference, if child potentially eligible for Part B.	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	4	4	4
	Dispute Resolution: Complaints, Hearings	0	0	0
OTHER AREAS OF NONCOMPLIANCE:	Monitoring Activities: Self-Assessment/ Local APR, Data Review, Desk Audit, On-Site Visits, or Other	0	0	0
	Dispute Resolution: Complaints, Hearings	0	0	0
Sum the numbers down Column a and Column b			9	9

Percent of noncompliance corrected within one year of identification = **100%**

[Column (b) sum divided by column (a) sum] times 100

For FFY 2008, there was a change in the way data was collected for this indicator. Therefore, FFY 2008 data is not comparable to data previously collected and reported. For FFY 2008, ITEIP obtained data from the ITEIP DMS to report on this indicator. Prior to FFY 2008, ITEIP obtained data for this indicator from onsite monitoring visits.

During FFY 2008, ITEIP enhanced its DMS, by developing a detailed compliance report to ensure data accuracy. This report provided an additional data analysis tool to identify and correct data entry errors, review individual child status, and identify the need for additional technical assistance.

General Supervision and the Correction of Noncompliance:

ITEIP used the following definitions, criteria, and processes in reporting on Indicator 9.

Definition of Finding and Verification of Correction:

ITEIP provided written notification no later than 90 days from when it concluded a Local Lead Agency (LLA) was in noncompliance. The notification included the citation of the statute, federal regulation, and state definitions, policies, and procedures specifying the compliance to be achieved. The notification also contained a description of the quantitative and qualitative data supporting the conclusion of noncompliance. The notification also required that correction of noncompliance be made as soon as possible, but no later than one year from the date of notification. (See Attachment 2 – Decision Tree.)

When any child specific noncompliance occurred, ITEIP ensured each individual case of noncompliance was corrected. If the noncompliance was related to a timeline, LLAs were directed to take the required action although late (e.g. evaluation/assessment, service provision, transition conference). If LLAs continued to demonstrate uncorrected noncompliance by the time determinations were issued, they were required to develop written corrective action plans that included strategies, benchmarks, and timelines. To verify correction of noncompliance occurred, ITEIP reviewed subsequent data to ensure the LLA was correctly implementing the specific regulatory requirement. ITEIP grouped individual instances of noncompliance related to the same requirement into one finding for which the LLA must demonstrate compliance.

ITEIP Monitoring Process:

During FFY 2007, ITEIP began phasing in a new monitoring process (See Attachment 1 – Proposed Timelines for ITEIP Monitoring). The process relies on the ITEIP DMS's data drill down capabilities. This information provides the necessary data to identify noncompliance, review progress and verify correction. The analysis of data assists ITEIP in targeting technical assistance to LLAs to support improvement and correction.

Additional components of ITEIPs monitoring process will continue to be phased in, during FFY 2009. These components will include the development and piloting of: (1) a local self-assessment that will focus on key related requirements; and (2) focused onsite monitoring procedures and protocols.

Correction of Noncompliance Related to Indicator 1:

FFY	Number of Findings of Noncompliance Related to Indicator 1	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified
FFY 2005	1	0	1 (2007)
FFY 2006	0	0	0
FFY 2007	1	1	0

Correction of Noncompliance Related to Indicator 7:

FFY	Number of Findings of Noncompliance Related to Indicator 7	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified
FFY 2005	1	0	1 (2008)
FFY 2006	5	4	1 (2008)
FFY 2007	3	3	0

Correction of Noncompliance Related to Indicator 8A:

FFY	Number of Findings of Noncompliance Related to Indicator 8A	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified
FFY 2004	1	0	1 (2006)
FFY 2005	2	2	0
FFY 2006	2	2	0
FFY 2007	1	1	0

Correction of Noncompliance Related to Indicator 8B:

FFY	Number of Findings of Noncompliance Related to Indicator 8B	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified
FFY 2004	0	0	0
FFY 2005	0	0	0
FFY 2006	2	2	0
FFY 2007	0	0	0

Correction of Noncompliance Related to Indicator 8C:

FFY	Number of Findings of Noncompliance Related to Indicator 8C	Number of Findings for which Correction was Verified within One Year	Number of Findings for which Correction was Subsequently Verified
FFY 2004	1	0	1 (2006)
FFY 2005	3	1	2 (2007)
FFY 2006	3	2	1 (2008)
FFY 2007	4	4	0

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:**Determination: Needs Assistance – Year 2 – Indicator 9:**

- A. Technical assistance was accessed from:
 1. Regional Resource Center's Program website
 2. National Early Childhood Technical Assistance Center website
 3. Western Regional Resource Center staff
 4. National Early Childhood Technical Assistance Center staff (Anne Lucas).
- B. Based on the technical assistance received, the following actions were taken:
 1. Revised general supervision and monitoring processes and timetable

2. Provided policy clarification and guidance to LLAs
3. Developed detailed compliance report to assist in data reviews and discussions with LLAs, State Interagency Coordinating Council (SICC) and its committees.

During FFY 2008, ITEIP made significant progress in correcting noncompliance identified in FFY 2007. Correction for all identified noncompliance was corrected and verified no later than one year from when it was identified and notice provided. Progress made in correcting noncompliance can be attributed to:

- Improvements made to the ITEIP DMS that included a detailed compliance report.
- Increased access to compliance data through ITEIP DMS improvements.
- Increased data analysis through detailed compliance report drill down capabilities, which was accessible to both ITEIP and LLA staff.
- Increased ability to analyze compliance with related IDEA requirements.

With the enhancements made to the DMS, ITEIP continued to increase its capacity to review and analyze Indicators 1, 7, 8A, 8B, and 8C data. Based upon ongoing analysis, ITEIP has been able to provide more focused technical assistance, which resulted in correcting identified noncompliance no later than one year from when it was identified.

Improvement Activities Completed FFY 2008:

Provided training for LLA administrators in using the DMS reports to monitor progress.
Updated and revised LLA Corrective Action Plan and process.
Developed and implemented compliance detailed data reports to assess progress and provide technical assistance.

Revisions (With Justification) to Proposed Targets/Improvement Activities/Timelines/Resources:

ITEIP reviewed and revised its improvement activities. Upon evaluating its improvement activities, ITEIP added several activities that it determined would improve its system of general supervision.

During FFY 2007, ITEIP concluded that the Department of Social and Health Services, Operations Review and Consultation group would no longer serve to provide the ITEIP program and fiscal audits. As of FFY 2007, ITEIP began to utilize ITEIP DMS to gather compliance monitoring data for APR reporting purposes. ITEIP is in the process of developing a new LLA Self-Assessment and Focused Monitoring process that will enhance its current system of general supervision and compliance monitoring capabilities. The LLA Self-Assessment and the new ITEIP Focused Monitoring process will gather related requirements data and will also gather state identified indicator data.

New and/or Continuing Improvement Activities:

New Activity	Timelines	Resources
Develop and implement a revised LLA Self-Assessment and a Focused Monitoring process.	2009 - 2010	NECTAC, WRRRC, ITEIP, LLAs
Continuing Activity	Timelines	Resources
Implement technical assistance plan	2008 - 2010	WRRRC, NECTAC, DAC

**Part C State Annual Performance Report (APR) for FFY 2008
July 1, 2008 through June 30, 2009**

Overview of the Annual Performance Report Development:

See Overview of the APR Development, page 1.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 10: Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:
Percent = [(1.1(b) + 1.1(c)) divided by 1.1] times 100.
Applied:
1.1 = 1
1.1(b) = 1
1.1(c) = 0
Percent = [(1.1(1) + 1.1(0) divided by 1.1] times 100 = 100%

FFY	Measurable and Rigorous Target
2008 (2008 – 2009)	100% of signed written complaints, with reports issued, were resolved within the 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

Actual Target Data for FFY 2008:

100% of signed written complaints with reports issued were resolved within the 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

In FFY 2008, ITEIP received one (1) complaint with a report issued within the 60-day timeline.

Revisions (With Justification) to Proposed Targets/Improvement Activities/Timelines/Resources:

None.

**Part C State Annual Performance Report (APR) for FFY 2008
July 1, 2008 through June 30, 2009**

Overview of the Annual Performance Report Development:

See Overview of APR Development, page 1.

Monitoring Priority: Effective General Supervision Part C / General Supervision
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Indicator 11: Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(3.2(a) + 3.2(b)) divided by 3.2] times 100.
Applied: 3.2 = 0 3.2(a) = 0 3.2(b) = 0 Percent = [(3.2(0) + 3.2(0)) divided by 3.2] times 100 = 0%

FFY	Measurable and Rigorous Target
2008 (2008 – 2009)	100% of fully adjudicated due process hearing request were fully adjudicated within the applicable timeline.

Actual Target Data for FFY 2007:

N/A

During FFY 2008, Washington State's Infant Toddler Early Intervention Program had no requests for due process hearings.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

ITEIP did not receive any requests for due process hearings, during FFY 2008. ITEIP continued to provide training and technical assistance to Local Lead Agencies regarding their responsibility to ensure parents are aware of their rights and the availability of dispute resolution procedures, including due process hearing procedures.

Revisions (With Justification) to Proposed Targets/Improvement Activities/Timelines/Resources:

None.

**Part C State Annual Performance Report (APR) for FFY 2008
July 1, 2008 through June 30, 2009**

Overview of the Annual Performance Report Development:

See Overview of the APR Development, page 1.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 12: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures are adopted).

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent = (3.1(a) divided by 3.1) times 100.

This indicator does not apply to Washington State's ITEIP because ITEIP has not adopted Part B due process and procedures.

**Part C State Annual Performance Report (APR) for FFY 2008
July 1, 2008 through June 30, 2009**

Overview of the Annual Performance Report Development:

See Overview of the APR Development, page 1.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 13: Percent of mediations held that resulted in mediation agreements.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:
Percent = [(2.1(a)(i) + 2.1(b)(i)) divided by 2.1] times 100.
Applied:
2.1 = 0
2.1(a)(i) = 0
2.1(b)(i) = 0
Percent = [(0+ 0) divided by 0] times 100 = 0%

FFY	Measurable and Rigorous Target
2008 (2008-2009)	ITEIP will set targets for this indicator in any year that it conducts at least ten mediation sessions.

Actual Target Data for FFY 2008:

Washington State's Infant Toddler Early Intervention Program had no requests for mediation services during FFY 2008.

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

ITEIP did not receive any mediation requests, during FFY 2008. ITEIP continued to provide training and technical assistance to Local Lead Agencies regarding their responsibility to ensure parents are aware of their rights and the availability of dispute resolution procedures, including mediation and mediation agreements.

Revisions (With Justification) to Proposed Targets/Improvement Activities/Timelines/Resources:

None.

**Part C State Annual Performance Report (APR) for FFY 2008
July 1, 2008 through June 30, 2009**

Overview of the Annual Performance Report Development:

See Overview of the APR Development, page 1.

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 14: State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

State reported data, including 618 data, state performance plan, and annual performance reports, are:

- A. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and
- B. Accurate (describe mechanisms for ensuring error free, consistent, valid and reliable data, and evidence that these standards are met).

Applied:

See Indicator 14 Table.

FFY	Measurable and Rigorous Target
2008 (2008 – 2009)	100% of state reported data (618, SPP, and APR data) are timely and accurate.

Actual Target Data for FFY 2008:

100% of state reported 618, SPP, and APR data was accurate and submitted in a timely manner.

Part C Indicator 14 Data Rubric

Indicator 14 - SPP/APR Data			
APR Indicator	Valid and reliable	Correct Calculation	Total
1	1	1	2
2	1	1	2
3	1	1	2
4	1	1	2
5	1	1	2
6	1	1	2
7	1	1	2

Indicator 14 - SPP/APR Data			
8A	1	1	2
8B	1	1	2
8C	1	1	2
9	1	1	2
10	1	1	2
11	1	1	2
12	---	---	0
13	1	1	2
		Subtotal	28
APR Score Calculation	Timely Submission Points (5 pts for submission of APR/SPP by February 2, 2009)		5
	Grand Total		33

Indicator 14 - 618 Data					
Table	Timely	Complete Data	Passed Edit Check	Responded to Data Note Requests	Total
Table 1 – Child Count Due Date: 2/1/09	1	1	1	1	4
Table 2 – Settings Due Date: 2/1/09	1	1	1	1	4
Table 3 – Exiting Due Date: 11/1/09	1	1	1	1	4
Table 4 – Dispute Resolution Due Date: 11/1/09	1	1	1	1	4
				Subtotal	16
				Weighted Total (subtotal X 2.5; round ≤ .49 down and ≥ .50 up to whole number)	40
Indicator # 14 Calculation					
			A. APR Total		33
			B. 618 Total		40
			C. Grand Total		73
Percent of timely and accurate data = (C divided by (75-2) times 100)			(73) / (73) X 100 =		100%

Discussion of Improvement Activities Completed and Explanation of Progress or Slippage that occurred for FFY 2008:

ITEIP submitted SPP/APR and 618 data electronically to DAC and OSEP. ITEIP always retained a copy of the email cover memo that was attached to any data report submitted to DAC or OSEP. The cover memo always contained the day and time the data was sent.

ITEIP assured SPP/APR and 618 data was accurate by ensuring the following occurred:

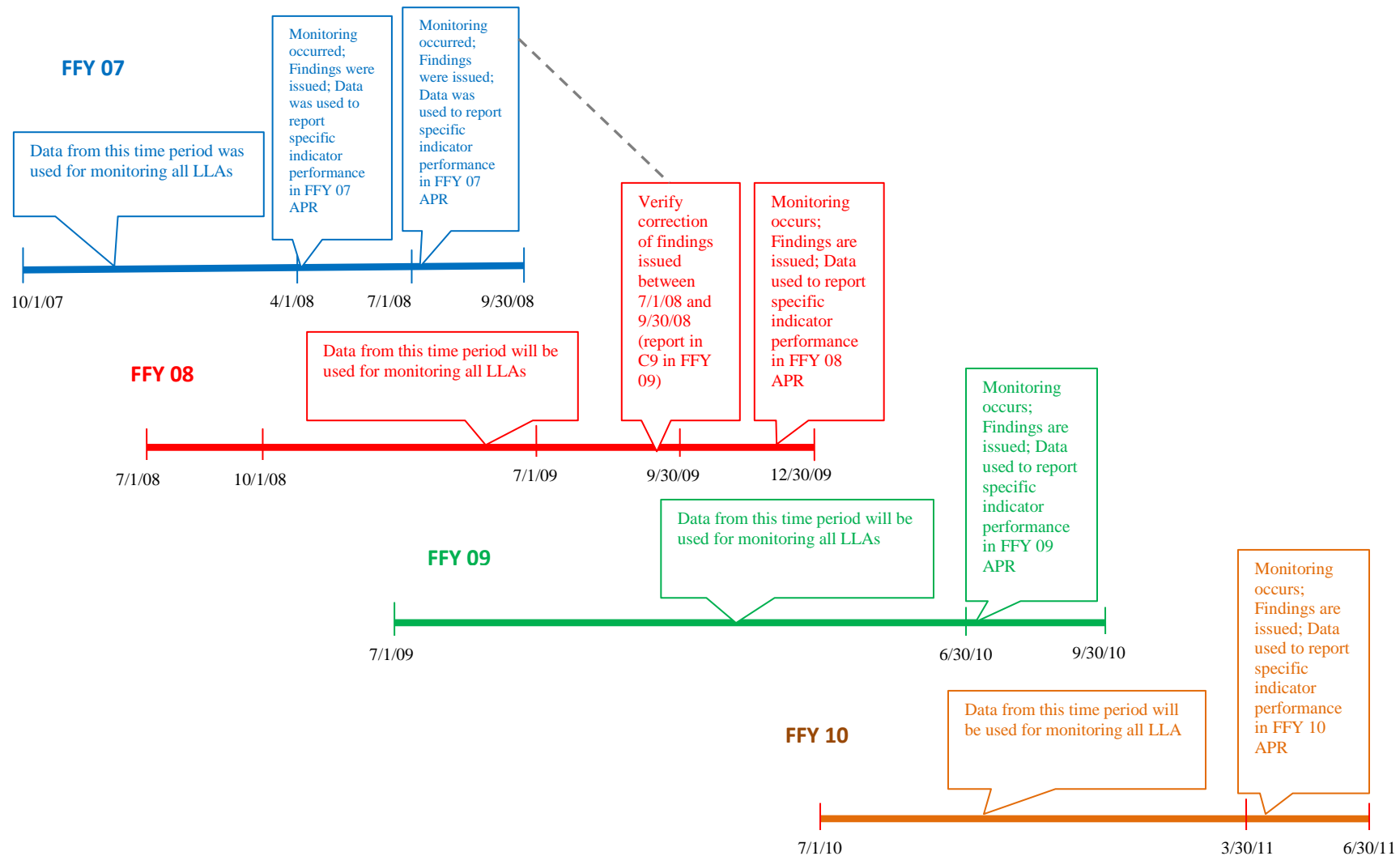
- A. The family and child information and other data required to generate each Individualized Family Service Plan (IFSP) was collected on the ITEIP Data Management System (DMS). Families were given IFSPs that were printed directly from the ITEIP DMS, by Family Resources Coordinators (FRCs).
- B. ITEIP reviewed and revised its DMS business rules throughout the year to enhance the system gathered data and ensure that it is accurate, valid, and reliable. ITEIP ran system-generated reports that provided a crosscheck to ensure data accuracy.
- C. ITEIP conducted its third round of data verification site visits to all Local Lead Agencies (LLAs). This was done to verify the accuracy of data entered into the ITEIP DMS, by reviewing source documents, analyzing and checking calculations, and comparing data obtained from the system with data found in the child's record.
- D. ITEIP developed the capacity to verify the data in the ITEIP DMS, by creating additional compliance, results, and ad hoc reports. For example, ITEIP was able to run a variety of reports, such as a report of children receiving services on a specified date. As the DMS generated a specific report (i.e., number of children receiving services on a given date), an ad-hoc report would be created that would be compared against the database, which produces the counts as well.
- E. Data was, and continues to be, published quarterly on the website and reviewed by ITEIP staff, LLAs, and other users to perform analysis on a year-to-year, quarterly, or monthly basis. Regarding monthly data, differences of 10% or more were reviewed for accuracy.
- F. During Federal Fiscal Year (FFY) 2008, ITEIP provided data training, on-going technical assistance, guidance, and support. ITEIP also published its training manuals on the web for access by LLAs and other users. As part of basic training for new FRCs, online data training was required.
- G. A monthly DMS newsletter was published and posted on the ITEIP website.
- H. The DMS offered links to "Frequently Asked Questions" that included both system and program questions and answers.
- I. ITEIP sought the input from the State Interagency Coordinating Council (SICC), SICC Data Committee, and the Data User/Advisory Group, as data system policies and procedures were developed and implemented.

Revisions (With Justification) to Proposed Targets/Improvement Activities/Timelines/Resources:

None.

Washington – Identifying Noncompliance, Root Cause, and Corrective Actions

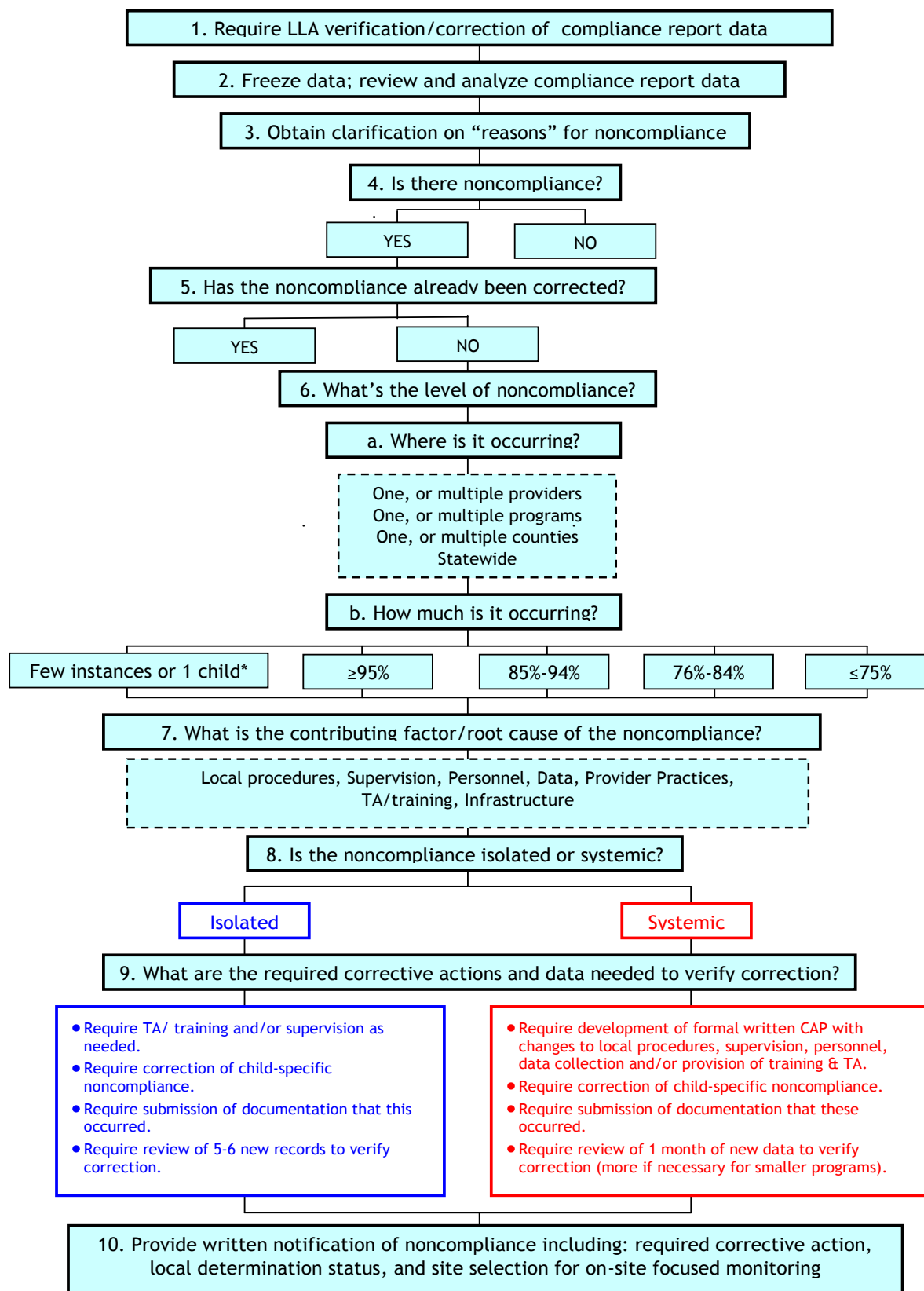
Proposed Timelines for ITEIP Monitoring



Verifying correction of noncompliance is completed on an ongoing basis to ensure correction of noncompliance as soon as possible, but no later than one year from data of written notification of findings.

Washington – Identifying Noncompliance, Root Cause, and Corrective Actions

DECISION TREE



Washington – Identifying Noncompliance, Root Cause, and Corrective Actions

Procedures for Correcting Noncompliance

1. **Require LLA verification/correction of compliance report data** – Using April, May, and June data¹, the lead agency staff provide formal notice to each LLA by ____ that the compliance report data, for this time period must be reviewed and verified for accuracy and submitted to the state lead agency by ____ for the purposes of monitoring. State staff provides technical assistance (TA) to LLAs to ensure that data is accurately entered in the Data Management System (DMS) and that sufficient information is entered for “reasons” related to noncompliance for each child, for the state to make conclusions about root cause of noncompliance. Examples of a sufficient reason for noncompliance are as follows:

Example 1: Service coordinator had unexpected illness

Example 2: Provider did not understand requirements related to scheduling initial evaluation
2. **Freeze data: review and analyze compliance report data** – Immediately following deadline for LLA’s to verify/correct data, the state lead agency freezes data in the DMS, so no additional data entry can be made to alter data being used for monitoring purposes. State staff review and analyze compliance report data, for each LLA, including “reasons” for any children whose services were reported as being delayed or if transition steps are not included in the IFSP.
3. **Obtain clarification on reasons for “delay”** – If necessary, the state lead agency requests clarification from LLAs, on the reasons for delays or if IFSP transition steps are not included in IFSPs, in order to determine the root cause of the noncompliance (see #7 below).
4. **Is there noncompliance?** – Based on review of data and “reasons” for delays or if IFSP transition steps are not included in children’s IFSP. The following guidelines should be used in determining if data demonstrates noncompliance:
 - a. If delays were a result of exceptional family circumstances, noncompliance would not be identified.
 - b. If the noncompliance is previously uncorrected noncompliance, a new finding of noncompliance does not need to be identified.
 - c. Any instance of noncompliance (child specific) must be identified.
5. **Has the noncompliance already been corrected?** – Based upon review of most recent data (either from the same time period that was used for monitoring [April, May, June] - **or** - from a subsequent time period [July, August, September]),² the state lead agency determines if noncompliance has already been corrected. Although findings of noncompliance are not required to be issued if correction has already occurred, issuing a finding of noncompliance helps increase the state’s correction percentage in C9 when reporting correction data in the subsequent APR. Decisions as to whether or not to issue a finding must be consistently applied across LLAs.
6. **What’s the level of noncompliance?** – Determining the level of noncompliance includes determining both where and how much the noncompliance is occurring:
 - a. **Where is it occurring?** – In reviewing the data:
 - i. Determine for each LLA if the noncompliance is occurring with one or more service coordinators and with one or more agencies/providers. Also, determine if

¹ For FFY 2008 and FFY 2009, data from the Data Management System, for the months of April, May, and June will be used for the purposes of annual monitoring conducted, during the following fiscal years (FFY 2009 and 2010 respectively). Beginning FFY 2010, data from the months of January, February, and March will be used for monitoring all LLAs, with monitoring conducted and written notification of findings issued prior to June 30, 2011 .

² Data from the same time period must be used to consistently determine if LLAs with noncompliance made correction prior to issuing the written notification of findings of noncompliance. In other words, selecting different time periods of data for different LLAs should not be done,

Washington – Identifying Noncompliance, Root Cause, and Corrective Actions

the noncompliance is occurring in only one or in several LLAs or statewide.

(NOTE: If noncompliance is occurring across multiple LLAs or statewide, state level actions will most likely be needed and should be based on the root cause of the noncompliance.)

- b. **How much is it occurring?** – For each LLA, determine the percentage of their compliance and noncompliance. The LLA's percentages will be used for public reporting, making local determinations, and selecting sites (those with greatest need) for onsite visits.
 - i. **Few instances or one child** – This category should be used primarily when reviewing small LLA's where there may be 10 or less children's records. Specifically, use this category if only one or 2 instances of noncompliance occur and it is difficult to determine if these few instances are indicative of a systemic issue.
 - ii. **Percentages** - LLA percentages are reported as percentage of compliance.
 - ≥95%
 - 85%-94%
 - 76%-84%
 - ≤75%
7. **What is the contributing factor/root cause of the noncompliance?** – In reviewing the reasons for the noncompliance and through discussion with LLA's and their providers, state staff determine the root cause(s)/contributing factor(s) of noncompliance. Root causes of noncompliance typically fall in six main areas:
- a. Local procedures³ (effective 2010)
 - b. Supervision of service coordinators/service providers
 - c. Accurate data collection and entry (effective 2010)
 - d. Infrastructure
 - e. Personnel
 - f. Training and technical assistance
 - g. Provider Practices

Determining the root cause of noncompliance frequently includes discussion with LLA's and their providers, about the various reasons for the noncompliance provided in the DMS. Many of the reasons, such as "Provider did not understand requirements related to scheduling initial evaluation," could be a result of several different root causes (e.g., local procedures are not clear or do not include steps/process for scheduling the initial evaluation, the service provider was not trained on the requirements and the existing local procedures). As a result, state staff will most likely need to have discussions with LLAs and their service coordinators and service providers to determine the appropriate root cause(s).

8. **Is it isolated or systemic?** – The lead agency determines if the noncompliance is isolated or systemic in order to determine the corrective actions for each LLA. The following guidance should be used when determining whether noncompliance is isolated or systemic.
- a. **Isolated** - Noncompliance is usually isolated if there are a limited number of instances of child-specific noncompliance related to the same requirement (e.g., 45 day timeline).
 - b. **Systemic** – Noncompliance is usually systemic if there are numerous instances of child-specific noncompliance related to the same requirement.

³ LLAs and their provider agencies should have local procedures in place that describe how state Part C policies and procedures are implemented by service coordinators and service providers (e.g., process and local timelines for assigning service coordinators, process and timelines for service coordinators to identify evaluators and the IFSP team to ensure that the 45 day timeline is met).

Washington – Identifying Noncompliance, Root Cause, and Corrective Actions

9. **What are the required corrective actions and data needed to verify correction?** – The state lead agency determines what the required corrective actions are and the data needed to verify correction, based upon whether or not the noncompliance related to the same requirement is isolated or systemic.

- a. **Isolated Noncompliance** – The following corrective actions are required for isolated noncompliance:

- TA/ training and/or supervision as needed.
- Correction of all child-specific noncompliance.
- Submission of documentation that this occurred.

The following data is needed to verify correction for isolated noncompliance:

- Review of 5-6 new records to verify correction.

- b. **Systemic Noncompliance** – The following corrective actions are required for systemic noncompliance:

- Development of a formal written Corrective Action Plan (CAP), with changes to local procedures, supervision, personnel, data collection, and/or provision of training & TA.⁴
- Correction of all child-specific noncompliance.
- Submission of documentation that these occurred.

The following data is needed to verify correction of systemic noncompliance:

- Review of 1 month of new data to verify correction (more if necessary for smaller programs).

10. **Provide written notification of noncompliance, including: required corrective action, local determination status, and site selection for on-site focused monitoring** – Written notification of noncompliance should be provided within three (3) months of requiring LLA verification/correction of compliance report data. In accordance with the September 3, 2008 *Frequently Asked Questions Regarding Identification and Correction of Noncompliance and Reporting on Correction in the State Performance Plan(SPP)/Annual Performance Report (APR)*, the notification must include the following information:

- a. The citation of the statute or regulation; and
- b. A description of the quantitative and/or qualitative data supporting the conclusion that there is noncompliance with that statute or regulation.

In addition, to the above required information, the lead agency will also:

- a. Specify the required corrective action based on the level and root cause(s) of the noncompliance (see #8 above).⁵
- b. Provide each LLA with their local determination status, based on the process established by the state and State Interagency Coordinating Council.

⁴ Some systemic noncompliance may have multiple root causes of the noncompliance, for the same requirement, while other systemic noncompliance may have only one root cause of the noncompliance. For example, an LLA has 20 of 100 instances of child-specific noncompliance with the 45-day timeline. The majority of the reasons for the noncompliance are related to no supervision process is in place to track timelines, for each child as they move through each step from referral to the initial IFSP meeting. Regardless, of the number of root causes, the formal written CAP must address all root causes identified for the noncompliance.

⁵ When monitoring FFY 2008 data, during FFY 2009, the state lead agency will not specify the root cause of the noncompliance, as part of the required correction action, but will initiate this activity when monitoring FFY 2009 data in FFY 2010.

Washington – Identifying Noncompliance, Root Cause, and Corrective Actions

- c. Select sites for on-site focused monitoring, based on the level of noncompliance, determination level, previous monitoring, and other data as determined appropriate (based on established procedures to be developed).

Washington – Identifying Noncompliance, Root Cause, and Corrective Actions

Plan for Streamlining and Aligning Washington’s Part C General Supervision System with APR Reporting and Data Management System

